

BUSINESS MEETING

THE MISSISSIPPI BOARD OF NURSING
BUSINESS MEETING

OCTOBER 8, 2021

PROCEEDINGS

taken on Friday, October 8, 2021,
commencing at approximately 11:12 A.M.
at the Mississippi Board of Nursing
713 South Pear Orchard Road
Plaza II, Suite 300
Ridgeland, Mississippi

REPORTED BY: CYNTHIA HARRIS, RPR, CCR, #1828
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APPEARANCES

BOARD MEMBERS IN ATTENDANCE IN PERSON:

- ALTON SHAW, MSN, FNP-C (PRESIDENT)
- T.J. ADAMS, RN, BSN, MSHA (VICE PRESIDENT)
- SANDRA CULPEPPER, LPN (SECRETARY)
- SHIRLEY JACKSON, LPN
- NANCY NORRIS-JOHNSON, LPN, II, CPT
- LACEY T. GENTRY, MSN, RN
- JEREMY L. CUMMINS, LPN, LHNA
- JANIE CLANTON, RN
- JAN COLLINS, CONSUMER

BOARD MEMBERS IN ATTENDANCE VIA ZOOM:

- LAURA MOORE, MSN, NP-C
- MELISSA KING, DNP, FNP-C

ALSO PRESENT:

- EDWARD WIGGINS, JR., ESQUIRE
- SPECIAL ASSISTANT ATTORNEY GENERAL

BUSINESS MEETING

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PROCEEDINGS

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MR. SHAW: We will go ahead and call the meeting to order. I do declare a quorum at this time. I understand we have a few of the board members participating remotely. Could you chime in and state your name?

(NO RESPONSE.)

MR. SHAW: Can they hear us? Anybody online? Oh, she said she can't really hear me. We understand we have a few members on the phone. If you could please state your name. We've got to cut them up somehow.

Now, Melissa, can you try to repeat?

DR. KING: I can. How are you?

MR. SHAW: All right. We can hear you loud and clear now. Any other board members on the phone?

DR. KING: Hey, Alton, if they are on the phone, like I see Laura on there, she is going to have to not just unmute her phone, but hit star 6 for the first time and then mute her phone back in order for you to hear her.

MS. MOORE: I'm on Zoom on my computer. This is Laura.

1 MR. SHAW: Okay, cool. So we have
2 Melissa King and Laura Moore participating
3 remotely. We have a quorum together.

4 Ms. Jackson, would you mind opening us up.

5 MS. JACKSON: I will. Thank you.
6 Good morning, everyone. If you will please bow
7 your heads.

8 (PRAYER.)

9 MR. SHAW: All right. Approve the
10 agenda. Do I have a motion we approve the agenda?

11 MR. ADAMS: Make a motion we approve.

12 MR. SHAW: Motion, T.J.

13 Second?

14 MS. NORRIS-JOHNSON: I second.

15 MR. SHAW: Second, Ms. Nancy Norris-
16 Johnson.

17 All in favor?

18 (ALL IN FAVOR.)

19 MR. SHAW: Motion carries.

20 Open forum. Any members of the public
21 care to make a comment? We'll give a moment in
22 case there's anybody on Zoom.

23 MS. JOHNSON: Mr. Chair, while we're
24 waiting for the public comment, this is your
25 opportunity if you have e-mailed me or called me,

1 and you have a report to submit. I do know that
2 Eliza Pillars wanted to submit a report this
3 morning. I think their president, Yolanda Murry,
4 and Dr. Audwin Fletcher are on the call. So this
5 is your opportunity at this time to present your
6 report.

7 MS. MURRY: Good morning. Greetings
8 from Eliza Pillars Registered Nurses of
9 Mississippi. I am Yolanda Murry, registered
10 nurse, family nurse practitioner, with over 27
11 years of nursing experience.

12 I am the 18th state president of Eliza
13 Pillars Registered Nurses of Mississippi. I was
14 sworn in virtually on May 1st, 2021, to serve in
15 this capacity.

16 I am an active member of Mississippi
17 Nurses Association and a proud member of Alpha
18 Kappa Alpha Sorority, Incorporated.

19 I was born and raised in the small town in
20 the Mississippi Delta named Beulah. I currently
21 live in Hernando, Mississippi.

22 Eliza Pillars was founded by Eliza Pillars
23 in 1945 and remains the first African-American
24 nursing organization.

25 We are currently serving the State of

1 Mississippi in districts. We have five active
2 districts: district I, Tupelo; district II,
3 Greenville; district IV, Jackson; district V,
4 Meridian; and district VI, Natchez. We currently
5 have two inactive districts, hoping to activate
6 those during this tenure.

7 Our mission and values are guided by
8 Ms. Pillars' own inspiration. Our motto, "An
9 organization dedicated to excellence in
10 healthcare." Our mission and values remain
11 constant, even throughout these last two years of
12 our global pandemic of COVID-19.

13 How do we continue to carry out this
14 mission? By service. Community services are
15 reflective of Ms. Pillars' life, giving back to
16 the community through health and education
17 services are very important to the membership.

18 PEARL project: Prevention, education,
19 advocacy, referral, living healthy. In the midst
20 of the pandemic, we are still able to fulfill this
21 mission by providing community vaccine drives,
22 educating the public about vaccines, masking up,
23 social distancing. And kudos to all the nurses
24 that are on the front line and behind the scenes
25 producing data for research or assisting in any

1 ways possible.

2 Our upcoming events of Eliza Pillars
3 Registered Nurses of Mississippi: We are
4 (indiscernible) February 19, 2022, welcome to our
5 annual February Update, hosted by our district II,
6 Greenville, Mississippi - the chapter that I am
7 in. Our Update will be face-to-face or virtual if
8 the COVID-19 (indiscernible).

9 Continue to view our web page for upcoming
10 events. Our annual convention, dated April 28th
11 through May 21st -- May 1st - I'm sorry - 2022 in
12 Biloxi - planning it has began {sic}, and it will
13 be in-person, but virtual will be an option.

14 We achieved our very first virtual update
15 and convention this year.

16 As nurses, we have tapped into technology
17 like none before.

18 In closing, I would like to invite the
19 Mississippi Board of Nurses to our annual
20 convention to keep us updated on protecting the
21 public and the great job everyone is doing.

22 Joining me today is Dr. Fletcher, which is
23 our treasurer, and Ms. Bess Blackwell, which is
24 the secretary.

25 Thank you for allowing us the opportunity

1 to serve. And if any questions, please do so at
2 this time. Thank you.

3 MR. SHAW: Thank you for that report.
4 Anybody have any questions?

5 Thank you again for that, and what you do.

6 Are there any other members of the public
7 that would like to make a comment?

8 (NO RESPONSE.)

9 MR. SHAW: If not, move on to ONW.

10 MS. CULPEPPER: I'm going to --

11 MR. SHAW: You're going to speak on
12 it?

13 MS. CULPEPPER: Yes, because I need to
14 bring something to the board.

15 MR. SHAW: Okay.

16 MS. CULPEPPER: So, Mr. President, I
17 would like to make a motion that we approve the
18 \$792,500 be released to the nursing schools for
19 scholarship funding at this time.

20 MR. SHAW: Any questions on that?

21 (NO RESPONSE.)

22 MR. SHAW: If not, we have a motion to
23 go ahead and pay the scholarships out of the ONW
24 fund. Do I have a second?

25 MR. CUMMINS: Second.

1 MR. SHAW: Second.

2 All in favor?

3 (ALL IN FAVOR.)

4 MR. SHAW: And motion carries.

5 UNIDENTIFIED SPEAKER: Yes. I finally
6 got signed in. I have a question whenever it's
7 appropriate.

8 MR. SHAW: Okay, go ahead. Who is
9 this?

10 UNIDENTIFIED SPEAKER: Yeah, so...

11 MR. SHAW: We're having trouble
12 hearing. We've heard a couple of things and
13 that's it. Is this Andrea?

14 UNIDENTIFIED SPEAKER: This is
15 (indiscernible). I'm signed in on my mom's
16 computer.

17 Okay. My question is that many nursing
18 professional organizations signed on to a -- Okay.
19 Can you hear me now?

20 MR. SHAW: Yes.

21 UNIDENTIFIED SPEAKER: Yeah, many
22 professional nursing org--

23 MR. SHAW: And it's gone away again.
24 We'll go on through the agenda, and once we get to
25 the end, we'll try to see if we can get back in

1 touch and let you speak then.

2 Moving on right now. Dr. Burks.

3 MS. JOHNSON: Did you have a motion?

4 MR. SHAW: Yeah, we've already taken
5 care of that one.

6 DR. BURKS: Good morning, everyone.

7 For PN education, I have three items to
8 bring forward to the board. The first item is
9 Holmes Community College. They submitted a
10 proposal request to offer a part-time night and
11 weekend program.

12 This proposed program, it would utilize
13 option 5 as outlined in the Community College
14 Board curriculum.

15 The option 5 coursework, it will begin in
16 the summer, and it will continue for five
17 consecutive semesters with the class completing in
18 December.

19 They also have a request to increase PNV
20 1144, {sic} which is a fall course - to increase
21 that by one hour.

22 They have a plan to admit 30 students per
23 year, and this will be on the Ridgeland campus.
24 They typically have a program there, and it also
25 admits 30 students annually.

1 They have a hybrid program that was
2 approved a while back, and they admit 15 students
3 every other year in August.

4 Recently, they had 861 students district-
5 wide to apply for the PN program.

6 MR. SHAW: Excuse me, Dr. Burks. The
7 ones on the phone are having trouble hearing you.

8 DR. BURKS: Okay. Is that better?

9 MR. SHAW: I don't know; they'll tell
10 me in a minute.

11 DR. BURKS: The Holmes Community
12 College -- and their district, they had 861
13 students to actually apply for the program. 113
14 did not meet their admission requirement; however,
15 748 students did.

16 The Grenda campus, they had 290
17 applicants. They only accepted 30 students.

18 Kosciusko had 120; they only accepted 30.

19 And Ridgeland had 419 applicants, and they
20 only accepted - excuse me - 30 students.

21 They did have documented letters of
22 support from their community and their clinical
23 partners, and that information is available if
24 needed.

25 They completed a survey, and their survey

1 demonstrated there was a need for additional
2 options in that area.

3 They have support from their campus
4 administrative team as well.

5 Their licensure pass rate for the last
6 three years: In 2018, they had 100 percent pass
7 rate on boards; '19, 84 percent; and 2020, they
8 had 100 percent pass rate on boards.

9 The recommendation is: Holmes, if they
10 were given permission to offer that program, they
11 will need to refer that increase for credit hours
12 from PNV 1114 {sic} to MCCB. They will be
13 required to adhere to the standards of a PN
14 accreditation, as well as provide the Board of
15 Nursing with an outcome status report, and this
16 will be done six months after the initial class
17 graduates.

18 The second item I have is from Mississippi
19 Gulf Coast Community College.

20 MR. SHAW: Dr. Burks, just a second.
21 Does anybody, before we move on to another one,
22 have any questions on this one?

23 MS. COLLINS: What is their ask? I'm
24 sorry. What is their ask of us? Did I miss that?

25 DR. BURKS: They're asking to offer a

1 part-time program. They already have a --

2 MS. COLLINS: Okay. Yeah, I heard
3 that at the beginning. But we have to give them
4 approval to do that?

5 DR. BURKS: Yes.

6 MR. SHAW: Before we get into the
7 other ones, anybody have any other questions on
8 this one?

9 (NO RESPONSE.)

10 DR. BURKS: Mississippi Gulf Coast,
11 they have submitted a proposal request to offer a
12 healthcare apprenticeship program for practical
13 nursing.

14 This proposed program -- it includes the
15 traditional training, and it actually emphasizes
16 on-the-job learning.

17 Memorial Hospital and Singing River Health
18 Systems, they're going to partner with Mississippi
19 Gulf Coast if they are able to offer this program.
20 And both of these facilities have been approved by
21 the United States Department of Labor to
22 participate in the apprenticeship training in
23 healthcare.

24 The site of this program is going to be
25 the Bryant Center.

1 And their proposed class size, because
2 this is an apprenticeship program, is going to be
3 10.

4 Their licensure pass rate for the last
5 three years has been 100 percent, and they receive
6 support from the healthcare facilities.

7 The thing that Memorial Hospital and
8 Singing River is going to do, if they're allowed
9 to do this, is those individuals who are part of
10 that program, they're going to offset and pay the
11 tuition for those individuals, while also
12 providing them with jobs during that time. So
13 they'll get paid for a job, and they'll also pay
14 for their tuition.

15 They do have a set of requirements for
16 that apprenticeship program, and they are listed,
17 which is very similar to all the schools in the
18 state.

19 This apprenticeship program, it is very
20 tedious in nature. I've supplied you all with a
21 crosswalk of the curriculum. So if you look at
22 the crosswalk of the curriculum, you'll notice
23 that it outlines the Mississippi Community College
24 Board curriculum, in addition to what this program
25 is going to look like as an apprenticeship.

1 Again, the focus is on, on-the-job
2 learning. So the first 16 weeks, they're going to
3 have 248 hours. It's going to be a second 16
4 weeks, which, again, is 248 hours. The third and
5 the fourth 16 weeks are also going to be 248
6 hours.

7 They're going to have the expanded role
8 integrated throughout this apprenticeship model,
9 which is one of the requirements as well.

10 The recommendation is that they be given
11 permission to pilot this apprenticeship program,
12 and they will also be required to adhere to the
13 standards of the practical nursing accreditation.

14 The course modules and objectives, it must
15 reflect the integration of IV therapy, since that
16 is a part of that expanded role. And their
17 transcripts must reflect the equivalent courses
18 that are required for completion in the State of
19 Mississippi. They are to notify the board of any
20 changes in their classroom location because this
21 is an apprenticeship program. If they opt to
22 teach classes within the healthcare facilities, we
23 would need that information because those
24 classrooms would have to be evaluated to make sure
25 they adhere to the standards and guidelines in

1 terms of size.

2 In addition, they need to also provide the
3 Board of Nursing with a status report, and my
4 recommendation, it's to be done after the second
5 16 weeks and, hereafter, after those individuals
6 complete that class.

7 MR. SHAW: Any questions on that one?

8 MS. CULPEPPER: I do. Dr. Burks --

9 DR. BURKS: Yes, ma'am.

10 MS. CULPEPPER: -- forgive me, but I
11 recall this. This looks very familiar, and I
12 believe we kind of saw a different take on this at
13 the last board meeting.

14 DR. BURKS: It's a different one.

15 MS. CULPEPPER: I know, but it still
16 addresses medical assistants. It does not tell us
17 that they are certified. And they're still
18 wanting to kind of do the same thing; it appears.
19 However, once again, we have no regulation over
20 medical assistants. And to bring them in and give
21 them credit hours towards something that we have
22 no regulation over is still a point of contention
23 for me.

24 DR. BURKS: The apprenticeship program
25 is --

1 MS. JOHNSON: Different.

2 DR. BURKS: -- different than them
3 wanting to do the medical assistant. With the
4 apprenticeship program, they're not going to
5 receive any credit for prior learning.

6 MS. CULPEPPER: So where it has in
7 here -- and I just want to make sure that I
8 clarify because, once again, I will refer back to
9 -- it talks about prior-learning-credit hours over
10 here on this second section - referring back to
11 the July meeting.

12 DR. BURKS: That's the third thing.

13 MS. JOHNSON: That's the third thing.
14 That's totally different. It's two different
15 things.

16 MS. CULPEPPER: Okay.

17 MS. JOHNSON: You're talking about
18 another program. She's going to talk about that
19 after this.

20 MS. CULPEPPER: Okay. So I just want
21 to clarify that they're not getting credit as an
22 MA.

23 DR. BURKS: No.

24 MS. CULPEPPER: And is this more
25 geared toward MAs? CNAs? Or is this going to

1 encompass everyone?

2 DR. BURKS: This encompasses everyone.
3 The only difference is they have more on-the-job
4 -- they're going to have more clinical hours with
5 their apprenticeship program.

6 What they've done is they have modeled
7 this program off of Louisiana. Louisiana started
8 an apprenticeship program several years ago, and
9 that program has been successful. So what they
10 have done is, they've taken that Louisiana model,
11 and they've created this model.

12 I spoke with Louisiana Workforce to see
13 how did they do. I also spoke with the board of
14 nursing, and I've had meetings with Ochsner
15 because Delgado Community College in Louisiana,
16 they have partnered with Ochsner to create this
17 program.

18 And it is a little different in terms of
19 that clinical component because one of the things
20 that we find is people complain about students
21 graduating and not having enough clinical
22 experience. So this is going to provide them with
23 clinical experience. And the amount of time is --
24 the traditional program is 12 to 15 months. This
25 is going to be a 15-month program. So that

1 difference is instead of them doing a year,
2 they're going to enter into a contract. This is
3 15 months; it is very tedious. But that focus is
4 going to be placing them in that clinical setting.

5 Right now, for example, first-semester
6 students in the practical nursing program, they
7 have a total of 75 clinical hours, which most
8 people say, "Well, by the time they get in, start
9 learning, that learning experience is over."

10 And if you see with this model, it's
11 basically triple that on-the-job experience and
12 that clinical. So that's the focus of this.

13 But it's going to be open to anyone that
14 meets that criteria.

15 They'll have to have an age -- criminal
16 background check and the ATT in addition to the
17 TEAS, which is the standard admission criteria for
18 most of the schools.

19 MR. SHAW: We're still having a
20 technical issue where nobody can hear. I don't
21 know how to cut that mic up. There's got to be
22 some buttons to punch somewhere to make it more
23 sensitive and to turn up the volume.

24 MS. MONTGOMERY: I think they just
25 want her to speak up a little louder.

1 MR. SHAW: Well, she'll be yelling
2 then. It's not you. It's this thing here.

3 MS. CULPEPPER: And so thank you for
4 clarifying that --

5 DR. BURKS: Yes, ma'am.

6 MS. CULPEPPER: -- because that does
7 make a difference. And I get where that's going.
8 So I appreciate you clarifying that section
9 because when I was reading it, that was my concern
10 was making sure that we're encompassing everyone
11 that has the ability to enter this type of
12 program.

13 DR. BURKS: Yes, the apprenticeship
14 will encompass everyone; it's not focused just on
15 medical assistants. But they will have to meet
16 that admission criteria in order to be a part of
17 this program.

18 And that's the thing as well -- I forgot
19 to mention that. They're going to sign contracts
20 and have specific contracts because it is so
21 tedious that they understand the expectations of
22 this because the hospitals are willing to commit
23 to these individuals in paying their tuition as
24 well as allowing them to work in their facilities
25 and pay them a paycheck while they navigate this

1 program.

2 And their goal is hopefully once they do
3 this, those individuals will stay there and work
4 as nurses because they're vested, and then they
5 will return to school, transition to become RNs.

6 MS. COLLINS: But they're not
7 obligated to hire them after it's over with;
8 right?

9 DR. BURKS: Yes, that's going to be
10 their plan. They want them to stay.

11 MS. COLLINS: What if they get in
12 there, and they don't like their...

13 DR. BURKS: All of that is going to be
14 outlined in their contracts.

15 MS. CLANTON: And I do have a
16 question. What is their -- what is the college's
17 -- what's their target market for this? Is it the
18 high school students that are thinking that they
19 want maybe to come into the nursing program, or is
20 it workforce development, you know, people out of
21 a job?

22 DR. BURKS: It's pretty much workforce
23 development because you have individuals that are
24 working in the facilities; they desire to be
25 nurses, but they cannot afford to quit their jobs

1 to --

2 MS. CLANTON: Okay.

3 DR. BURKS: -- commit to a program.

4 So this is an opportunity for -- under workforce
5 for them to help those people who have a desire.
6 And -- because we know, for example, you have --
7 I'm going to use the group CNAs. There are a lot
8 of facilities that have wonderful CNAs; they would
9 love to go back to school, but financially, it's
10 not realistic for them. So that's the group that
11 they're looking at and focusing on those
12 individuals who are in the workforce. It doesn't
13 matter what department they're in, but they have a
14 desire, have the ability, and can meet the
15 admission criteria.

16 MS. CLANTON: Okay.

17 MR. CUMMINS: Dr. Burks, is the -- and
18 just to recap real quick. Is the prerequisite and
19 admission requirements the same as the traditional
20 class?

21 DR. BURKS: Yes.

22 MR. CUMMINS: It's the same
23 prerequisites. And then as far as classroom
24 hours, will they {sic} be any classrooms hours at
25 all, or is this 100 percent on-the-job?

1 DR. BURKS: No. There are classrooms.
2 They have the theory component, but they're going
3 to be in the classroom.

4 MR. CUMMINS: Oh, I'm sorry. I didn't
5 see that.

6 MS. CLANTON: "Lecture."

7 MR. CUMMINS: Okay, okay. All right.
8 Thank you.

9 DR. BURKS: It's just that they're
10 going to have more of the clinical component.
11 It's going to increase those clinical hours.

12 Yes. They have to pass NCLEX --

13 MR. CUMMINS: Right.

14 DR. BURKS: -- to become LPNs.

15 MR. CUMMINS: You mentioned a -- of --
16 of -- of talking back and forth with Louisiana
17 school doing this. Are their NCLEX rates -- what
18 do their success rates look like?

19 DR. BURKS: 100 percent.

20 MR. CUMMINS: Okay.

21 MR. SHAW: So any other questions on
22 this specific one?

23 (NO RESPONSE.)

24 MR. SHAW: All right. Now, we get to
25 move on to the other one.

1 DR. BURKS: Yes, sir. The last
2 item -- this is a follow-up on the request from
3 the July 2021 meeting for Mississippi Gulf Coast
4 Community College. They requested to offer that
5 medical assistant to the PN option. And I just
6 did a recap and placed that information on there
7 that will show their proposed request, in addition
8 to the program hours and what's outlined in the PN
9 curriculum.

10 The question asked from the board was
11 regarding the proprietary schools: Were they
12 required to adhere to the framework? Those
13 schools are not required to follow the established
14 curriculum by -- that the community colleges use.

15 If those schools are not accredited, they
16 may follow the guidelines set by any certification
17 company; for example, they use CCMA, NHA. There
18 are no laws or regulations that could make the
19 proprietary schools utilize MCCB curriculum. They
20 use the industry standards; those programs have no
21 set time frame, MCCB curriculum. They even have a
22 one-year program or a two-year, and that's
23 dependent on if the students are going to receive
24 a technical certificate, or if they're going to
25 receive their degree afterwards.

1 So from the proprietary standpoint, the
2 program could be four months, six months, nine or
3 up to a year. And then there's no required total
4 contact or program hours. So the amount of time
5 they stay in class is varied.

6 If they are accredited, they follow the
7 quality standards set by the accreditors.

8 My concerns are still, as before: This
9 curriculum, it differs from the approved,
10 standardized curriculum. This request includes a
11 hybrid format. The traditional program is 100
12 face-to-face. They want students to utilize prior
13 learning credit, which is not an option with the
14 traditional PN program. And it is slightly
15 revised in terms of how they teach that
16 information as it relates to IV therapy.

17 MR. SHAW: All right. Any questions
18 on that?

19 MS. CULPEPPER: I will still refer
20 back to we have no regulation over MAs. And for
21 -- my point of contention on this is we don't know
22 what they've been out there doing. There's no
23 reporting body, and we're going to allow them to
24 have an easy access into a nursing program, in
25 which at the end of the day, we will be

1 responsible for. And that is an issue to me.

2 Now, if we're talking about someone that's
3 certified and is being regulated, I'm more open to
4 that discussion. But if we're not, we're going
5 into an area that I'm not comfortable with, if
6 that makes sense.

7 Are they open to the discussion of doing
8 this differently?

9 DR. BURKS: I had asked that question
10 before to them, and they really wanted to go with
11 the model in which they presented.

12 MR. SHAW: All right. So we will
13 address them individually. On the first request
14 for Holmes Community College to offer a part-time
15 night and weekend program for the LPN, do I have a
16 motion to approve that?

17 MS. NORRIS-JOHNSON: I make a motion.

18 MR. SHAW: I have a motion, Ms. Nancy
19 Norris-Johnson.

20 MR. CUMMINS: Second.

21 MR. SHAW: Second, Jeremy.

22 All in favor?

23 (ALL IN FAVOR.)

24 MR. SHAW: Motion carries.

25 Next we have the Mississippi Gulf Coast

1 Community College proposal to offer a healthcare
2 apprenticeship program for the practical nursing.
3 Do I have a motion that we approve that
4 apprenticeship program with their past 100 percent
5 pass rate?

6 MS. JACKSON: I make a motion.

7 MS. CULPEPPER: I will second it.

8 MR. SHAW: Ms. Jackson. Ms. Culpepper
9 second.

10 All in favor?

11 (ALL IN FAVOR.)

12 MR. SHAW: Motion carries.

13 For the last one, there still seems to be
14 questions on this. So I think to put it to rest
15 and say that this is not going to work like this.

16 Do we have a motion to deny this request?

17 MS. CULPEPPER: I will make the motion
18 to deny.

19 MS. JACKSON: I second.

20 MR. CUMMINS: I second.

21 MR. SHAW: I have a motion and a
22 couple of seconds. Take your pick. I think
23 Ms. Jackson spoke first.

24 All in favor?

25 (ALL IN FAVOR.)

1 MR. SHAW: Motion carries for denial.

2 Thank you, Dr. Burks.

3 DR. BURKS: Thank you all.

4 MS. COLLINS: Is this the first year
5 we've had all of those requests? Was this
6 prompted by COVID?

7 MR. SHAW: I think it's prompted by a
8 lot of things. But, you know, really just now
9 we're getting into the meat and bones of us taking
10 over that curriculum, so we'll have more of that
11 coming up.

12 MS. CULPEPPER: Thank you, Dr. Burks.

13 MR. SHAW: All right. Let's get the
14 formalities out of the way.

15 The business meeting minutes July 23rd.
16 Have a motion to accept?

17 MR. ADAMS: Make a motion.

18 MR. SHAW: Motion from T.J.
19 Second?

20 MR. CUMMINS: Second.

21 MR. SHAW: Second, Jeremy.

22 All in favor?

23 (ALL IN FAVOR.)

24 MR. SHAW: Motion carries.

25 Agreed settlement proposals to accept July

1 2021.

2 MR. ADAMS: Make a motion.

3 MR. SHAW: Motion, T.J.

4 MR. CUMMINS: Second.

5 MS. COLLINS: Second.

6 MR. SHAW: Second, Jeremy.

7 All in favor?

8 (ALL IN FAVOR.)

9 MR. SHAW: Board hearing panel minutes
10 from June and July 2021. Accept those?

11 MR. ADAMS: Make a motion.

12 MR. SHAW: Motion, T.J.

13 MR. CUMMINS: Second.

14 MR. SHAW: Second, Jeremy.

15 And waive reading and names on motions.

16 MR. ADAMS: Make a motion.

17 MR. SHAW: Motion, T.J.

18 MR. CUMMINS: Second.

19 MS. JACKSON: Second.

20 MR. SHAW: We'll give this one to

21 Ms. Shirley.

22 All right. Ms. Jackson, second.

23 All in favor?

24 (ALL IN FAVOR.)

25 MR. SHAW: All right. Agreed

1 settlement proposals upcoming December 7th.
2 Disciplinary hearings 8th and 9th, and the
3 business meeting will be December 10th.

4 The panel members for this upcoming one
5 are T.J. Adams, Nancy Johnson, Shirley Jackson,
6 and Janie Clanton.

7 Legislation: Trey, whatcha got?

8 MR. BOBINGER: All good. We'll start
9 off talking about on a high note, marijuana,
10 medical marijuana. Actually, I think most of
11 y'all are probably tired of hearing about medical
12 marijuana, as are the governor, lieutenant
13 governor, speaker, members of the legislature.
14 However, it's out there.

15 I got to visit personally with the
16 lieutenant governor last evening, and also with
17 Speaker Gunn; I was at a small gathering of folks.

18 And yesterday afternoon the speaker and
19 lieutenant governor sent a notice to Governor
20 Reeves stating that they had reached an agreement
21 on the terms of the medical marijuana bill. It's
22 been a back and forth. I mean, everybody thought
23 it was going to be somewhat easy, but it's really
24 been a lot of back and forth; it's taken some
25 time.

1 But, you know, Speaker told me very
2 clearly they had agreed on terms, and that
3 something was sent to the governor yesterday.

4 In our Constitution, the governor has
5 total control whether or not to call a special
6 session, and he also controls what goes on in that
7 special session. So now it'll be up to Governor
8 Reeves to determine if and when he will call a
9 special session. I assume that he will. I would
10 think it would be in the near term, but,
11 obviously, we'll let him make that call. So I'm
12 not going to try to guess it. But I would think
13 it would be in the near future.

14 Just as a side note, I could go through
15 the terms. I shared the draft bill with Phyllis
16 and Shan and Brett and some of our people out here
17 a couple of weeks ago. But I think nurse
18 practitioners would be included in issuing
19 certificates or certifications, like physicians,
20 for people to go and purchase at these so-called
21 dispensaries that would be located in various
22 communities around the state. Of course, that's
23 permissive, not mandated, of course. So I just
24 wanted to mention that as a side note. So we'll
25 see what happens. There's a lot to it.

1 I mean, I think everybody you talk to, if
2 you talk in terms of medical marijuana and
3 treating children and cancer patients, I think
4 there's a lot of support. Where it can get --
5 Phyllis, as we discussed, a little more out there
6 is people that may want to be using it for more
7 minor problems or other things. But I think the
8 legislature, from the draft I saw - and it's
9 subject to change, obviously - it looks like they
10 worked hard to try to tighten all that up.

11 This is much tighter than the initial
12 Initiative 65, which the Supreme Court struck that
13 down; that's what kicked it back to the
14 legislature. So we shall see.

15 On a good note, and I was mentioning our
16 director earlier last evening; I was talking to
17 the lieutenant governor. He has got a bill
18 drafted already dealing with additional
19 compensation for nurses due to the COVID and the
20 extremely difficult working conditions and
21 retention. He used the word, "Trying to keep
22 these people."

23 And I know the Board of Nursing and
24 Phyllis and our staff have worked very hard, along
25 with the board. We want to keep our people here.

1 We want to encourage new people into the
2 profession. But this may be a good way to do it.
3 So there's been a bill drafted. Lieutenant
4 Governor - I can tell you - he's serious about it;
5 he wants to move it. I would think Speaker Gunn
6 in the house would be open to this; I really do.
7 I think we'll get support. I think they will
8 probably use some of the COVID monies; we call
9 them the ARP monies, the American Recovery Plan
10 monies, for that. So I think that potentially is
11 good news for us.

12 Something that I had not heard before - I
13 think we've talked about it in the past - is the
14 lieutenant governor last evening also mentioned he
15 has drafted a bill or had a bill drafted - I
16 should say - to incentivize our nurses to stay in
17 state, and just as the physicians have had a
18 program for several years. You know, "We'll pay
19 your education or subsidize your education
20 expenses or costs if you agree, say, three, four
21 years to stay in Mississippi."

22 And he's got a bill drafted to do that for
23 nurses, so I was really excited to hear that. I
24 think that's a very positive thing. And he
25 seems -- he doesn't seem superficial in my

1 discussion. He seems committed to wanting to do
2 that. So I think that would be very positive for
3 our profession. So that's something we'll be
4 looking for this session.

5 MR. SHAW: Is there any way to cut on
6 the mic or cut it up or do anything? Because we
7 hear you here, but nobody else is hearing you on
8 the phone. That doesn't seem to raise any volume
9 either.

10 MR. BOBINGER: That doesn't?

11 MR. SHAW: Even the remote one, we
12 still hear the same amount. I can't hear any
13 extra.

14 MS. COLLINS: I've got a question when
15 you get through.

16 MR. BOBINGER: Yes, go ahead.

17 MS. COLLINS: Okay, Trey. Would that
18 also include some additional compensation or
19 training for the nurse educators? From my
20 understanding, the problem in the past has been
21 there aren't enough nurses -- nurse educators to
22 teach these students. Would it encompass
23 anything?

24 MR. BOBINGER: I have not seen a
25 draft. The lieutenant governor did not mention.

1 My feeling was it was more about the frontline
2 workers in our hospitals and clinics. Certainly,
3 I agree with you. I think we've got to keep
4 competent and sufficient numbers of nurse
5 educators. I don't know that this will address
6 that. But once the draft comes out, I can see
7 precisely what the language is. If it is, I'll
8 certainly let the board know that, but I think it
9 was more targeted to the people actually in the
10 hospitals and working.

11 Another interesting issue that greatly
12 impacts healthcare in Mississippi is this Medicaid
13 expansion. You guys know there's some strong
14 feelings on both sides of this issue. But I'm
15 hearing more and more talk from legislators, both
16 parties, about doing something. Some people don't
17 like the term "Medicaid expansion." It may be a
18 form of that or something to help expand those
19 that are not covered currently by some type of
20 healthcare.

21 Obviously, the state has to be fiscally
22 responsible. But, you know, Mississippi, you
23 know, we get almost a 4-to-1 match; it's between 3
24 and 4 to 1. So every dollar we put in, we get
25 almost 4 back, but you still have to look at that

1 dollar that you've got to put in. So having said
2 that, I know the lieutenant governor is at least
3 open to discussion or dialogue about some form of
4 expansion. I can't speak, you know, how far that
5 will go or what it would do, but I think he's open
6 to it. And I'm just starting to sense the
7 Mississippi Hospital Association has been out
8 front pro-Medicaid expansion.

9 Now, Mississippi State Medical recently, I
10 think, came out and made some statements that I
11 think it looks like they may engage to some degree
12 on being supportive of Medicaid expansion.

13 But there again, we'll just have to watch
14 and see, but I did want to mention that. I do
15 anticipate we're probably going to have some
16 hearings later in the fall - probably Senate
17 Public Health Committee. This is just what I'm
18 reading between the lines that we may have some
19 hearings later to discuss this issue and related
20 issues. So I'll keep the board posted.

21 Last but certainly not least, another
22 thank you to Shan for all of her good work on the
23 budget. Phyllis' input, working and those guys
24 and all of our staff putting together an excellent
25 budget request to the legislature. I can assure

1 you - and Ms. Collins knows with William, her son
2 working there - these budgets are not just merely
3 glanced over. They're analyzed line by line,
4 which is crucial. Because we've worked hard and
5 had folks putting it together, we've been engaged
6 at the Capitol, we've done well with our budget.

7 And legislature, I thank them and the
8 leadership for working with us on our budget. But
9 I wanted you to know there's a lot that goes into
10 it, and I think you've got a very strong budget
11 request that we're going forward with in this next
12 '22 session.

13 That concludes my report. If anyone's got
14 a question, I'll be happy to answer it.

15 MR. SHAW: Any questions?

16 MR. BOBINGER: Thank you.

17 MR. SHAW: All right. Executive
18 director report.

19 MS. JOHNSON: Good morning.

20 MR. SHAW: Good morning.

21 MS. JOHNSON: My report will be brief.
22 You have it before you, and hopefully everyone - I
23 do apologize for those that are on Zoom.
24 Hopefully you can hear me. My voice tends to
25 carry.

1 MR. SHAW: It's picking up a little
2 bit.

3 MS. JOHNSON: So we will try to
4 rectify that situation going forward. But you do
5 realize that we are having hybrid meetings. So
6 there are -- so you can attend in-person, but we
7 do limit our number. Going forward, if there are
8 individuals that would like to attend in-person,
9 please e-mail me, and I will let you know whether
10 you will be able to attend, based on the number.

11 With numbers going down with our COVID
12 situation, hopefully, we'll be able to allow more
13 individuals in. But I do apologize for the
14 inconvenience.

15 Going forward, just a few updates. One of
16 the things that I would like our board members --
17 and, again, thank you for your leadership and all
18 that you do each and every day, board members.

19 The Board of Director's retreat, you know,
20 we had this unfortunate weather situation to
21 occur, and we had to postpone that. And we would
22 like to reschedule that. So we're asking the
23 board members to give us a date. I've spoken with
24 the Chair about this prior to the meeting. We're
25 looking at January as being a good time because

1 that's an off month for us to hold hearings, and
2 that would give you all enough time to schedule if
3 you could come to a conclusion today because we
4 need to, again, lock in a venue for the board
5 retreat. And I think it's very important that we
6 go forward with the retreat. We do have some
7 excellent speakers that are still waiting on us to
8 get back with them on a proposed date because
9 their schedule gets booked pretty quickly. So I
10 would indulge the board to please try to give us a
11 date as to when we could have the retreat, at
12 least today.

13 The second thing is, there are some kudos
14 in play. I am so proud of our Board of Directors
15 and our staff.

16 Ms. Nancy Norris-Johnson has been
17 appointed to the NCSBN Nurse Licensure Compact
18 Training and Education committee, and we're
19 extremely proud of that. In addition, one of our
20 staff members, Dr. Burks, has been appointed to
21 the NCSBN Nurse Licensure Compact Research
22 committee.

23 And we have other staff that are also --
24 Ms. Culpepper, who is a board member, as well as
25 Sheron Russell, who is one of our staff members,

1 have been selected to the National NCLEX Item
2 Review and Development committee.

3 So I am so proud of our Board of
4 Directors, our staff for being involved at the
5 national level. It speaks volumes about the
6 leadership that you all provide for the State of
7 Mississippi, and we're at the table. And so I
8 think that's very important. So I encourage those
9 that have not -- even our new members going
10 forward, and I'll send you that information now;
11 that if you are interested, now is the time to get
12 involved.

13 I also would like to recognize Mr. T.J.
14 Adams, who is our board member. T.J. received a
15 promotion as administrator at North Mississippi
16 Medical Center in Tupelo. So we are indeed proud
17 of him and his accomplishments.

18 MR. ADAMS: Thank you.

19 MS. JOHNSON: Again, it speaks volumes
20 to the leadership we have on the board. So
21 congratulations to each and every one of you for
22 those accomplishments.

23 The other thing that I would like to bring
24 forward is MEC Hobnob. That will be conducted
25 October 28th from 8:30 to 1:00. If you are

1 interested - I know it's short notice, but we just
2 got the e-mail, I think, yesterday or the day
3 before it was sent to me. We do attend that. We
4 are members of the MEC, and we will be sponsoring
5 a table for that event. It will be held at the
6 Mississippi Coliseum this year. They are going
7 back to face-to-face. So it's an excellent
8 opportunity to meet your legislators, to hobnob,
9 and network with other industry and business. But
10 this is an excellent opportunity. Highly
11 encourage it. If you're able to attend, please
12 send an e-mail to Vanessa Gray, my executive
13 assistant, or me; you can cc me on that, and we
14 will make sure that we get the appropriate number
15 of seats so that you can attend. If you've never
16 gone, I highly encourage you, if you can,
17 participate in it. It's a great event.

18 You see on the board visibility, we've
19 been very active since our last board meeting.
20 Upcoming, we have the MNA conference. We have
21 Brett Thompson-May and Tina Highfill will be
22 presenting at that conference to represent the
23 Board of Nursing.

24 And Dr. Burks will be attending the
25 Community College Board and Department of

1 Education Regional Collaboration meeting later on
2 this month, I believe. As you know, we do have
3 the PN education program, and Dr. Burks is
4 intimately involved in anything dealing with that.
5 We don't have a lot to do with the curriculum, but
6 we do. So she'll have input also into those
7 curriculum conversations that they have at the
8 Community College Board as well.

9 We have lifted our travel restrictions
10 here at the board, so the staff, as well as board
11 members, if there are conferences coming up,
12 please let us know if you're interested in
13 attending because travel restrictions have been
14 lifted. There are certain guidelines that the
15 travel companies and airlines require that you
16 will have to meet, but let us know if you're
17 interested. We are allowing our staff now to go
18 to conferences that are being held in-person.

19 And I'm being told that probably in March
20 - and I'll send you all a save-the-date - which is
21 our mid-year, NCSBN mid-year meeting. That will
22 probably be in-person, and I think it's in
23 St. Louis. I sent the save-the-date yesterday, I
24 believe. I think it's going to be in St. Louis;
25 it will be in March. I will send it out to the

1 board members, so if you're interested in
2 attending that, you can go ahead and plan
3 accordingly.

4 And, Mr. Chair, that's all I have at this
5 point.

6 MR. SHAW: Thank you, Dr. Johnson.
7 Any questions?

8 All right. Shan, budget.

9 MS. MONTGOMERY: Good morning.
10 Dr. Mary Stewart is out today, so I will go over
11 the budget. Although the fiscal year ends June
12 30th, the agency had until August 31st to finalize
13 everything for fiscal year '21. A summary of the
14 year included the board collected \$6,836,291 in
15 the revenue field.

16 The expenditures for that year total
17 \$4,346,141.39. Remote working due to COVID
18 decreased our travel expenses and commodities.
19 And as Ms. Johnson just pointed out, that will
20 likely increase in the upcoming budget month.

21 Expenses were lower than the amounts
22 budgeted in every category except contractual
23 services and equipment. The reduction in those
24 areas made the overages possible.

25 Since revenues were higher than expenses,

1 the board was able to carry a large amount of cash
2 into fiscal year '22. For fiscal year '22, the
3 spending authority began July 1st for \$5,189,911.
4 This includes additional appropriation of \$22,876,
5 which will become available January 21st, 2022.

6 We did receive the salary amounts from the
7 State Personnel Board, which is over this \$22,000
8 amount. We do have the funds, so we will plan on
9 talking with our LBO analyst to increase that so
10 that all of the 3 percent increase that we've
11 discussed over the months will be able to be
12 included.

13 The agency has included this in the
14 internal budget, which is what I just said. This
15 amount will not be added in the accounting system
16 until January 1st, 2022.

17 Travel expenses are still much lower in
18 the budget year due to COVID. The other
19 operational expenses are expected to be the same
20 as last year.

21 The agency will purchase a vehicle this
22 year. I did mention in executive committee; we
23 kind of put that on hold because they had few cars
24 -- the inventory is very low, so we will probably
25 look in January to start looking at vehicles for

1 the board.

2 Revenue appears to be higher at this point
3 than it was in the last two preceding years.

4 Again, you guys received the individual
5 budget. If you have any questions, comments at
6 this time.

7 MR. CUMMINS: I have a question.
8 Shan, with the -- the -- I mean, I understand the
9 reason, but with there being just a vast
10 difference here in revenue versus expenditures, is
11 that putting us at risk of having a sweep by the
12 state? Is that -- you know, is it one of those
13 things that, you know, if you don't spend it, you
14 lose it type thing? And what can we do?

15 MS. MONTGOMERY: I'm glad you asked
16 that question, Jeremy. I do try to remind the
17 Board of Directors and the staff that if we don't
18 spend it, we do lose and we stand to be swept.
19 We've been swept once before. We're not immune to
20 being swept as an agency. I do encourage, when we
21 send out the notice, if there are any projects,
22 any initiatives that the board needs to be doing,
23 whether it's through Office of Nursing Workforce
24 or through the board or staff, then we need to get
25 those justifications in so that we can utilize

1 those funds in the best way because they will cut
2 the budget.

3 Thank you, Jeremy.

4 MR. SHAW: Any other questions? If
5 not, I have a motion we accept the budget report?

6 MR. CUMMINS: Motion.

7 MR. SHAW: Motion, Jeremy.

8 Second?

9 MS. CLANTON: Second.

10 MR. SHAW: Janie.

11 All in favor?

12 (ALL IN FAVOR.)

13 MR. SHAW: Yes?

14 MS. JOHNSON: Done with that motion?

15 MR. SHAW: Oh, yeah.

16 MS. JOHNSON: I forgot -- I just
17 wanted to mention to you all about the temporary
18 permits. I know you've probably already talked
19 about it. I know we discussed it in executive
20 committee.

21 But I have been doing some research on the
22 temporary permits that we have offered during the
23 COVID era. We were able to offer over 434 --
24 actually, a little over 500 permits to our
25 graduates, endorsements, and retired RNs. And

1 basically, my study dealt with the new graduates;
2 particularly, the ones that went to school in
3 Mississippi. There were 434 permits for
4 Mississippi graduates in Mississippi that we gave
5 out. And we were looking at did their ability to
6 come out and work prior to taking the NCLEX -- did
7 that affect their ability to pass the NCLEX and
8 practice? And the study was significant in that
9 approximately 82 percent passed NCLEX on first
10 write. These were nursing students that came out
11 and worked for 120 days, maybe more, prior to
12 taking the NCLEX -- while waiting to take the
13 NCLEX.

14 It showed that a significant amount passed
15 NCLEX on the first write. Of the 78 that did not
16 pass on first write, they were able to pass it
17 when they went back and took the test.

18 So the study has shown a significance in
19 that I think this is something we can continue.
20 It is already in our law. For whatever reason, at
21 some point, they were -- it was not being done or
22 had stopped being done. And so, I know Mr. Chair
23 will probably bring that out from the executive
24 committee.

25 But I think that's significant. We were

1 able to put approximately 360 new grads working
2 here during a time when we needed them. And so I
3 think that's a good recruitment tool.

4 Some of the hospitals have been behind it;
5 they've contacted me. They want to see it
6 continue for the new grads. I've gotten e-mails
7 and calls because under the emergency declaration,
8 you all extended the temporary permits, COVID
9 permits, through December. Well, this, you won't
10 have to do that. We already have it in law.

11 You know, we would -- you know, are
12 recommending that we be allowed to issue this in
13 accordance with the law to our new grads and some
14 endorsement apps; it's already stipulated in the
15 law who those are. And we have disaster temporary
16 permit for people that may need a temporary permit
17 that are not part of the compact to come in to
18 work under the public health emergency; that's
19 already in our law.

20 So we're asking that you all consider that
21 and make a recommendation through executive
22 committee to continue that.

23 But I wanted you all to have that data.
24 Some of the hospitals even paid for their new
25 grads to take the NCSBN review course prior to

1 taking the NCLEX, and that's a recruitment tool
2 for those hospitals to retain those individuals.
3 I think it's significant. I just wanted to give
4 you that data.

5 There's more to come. There were 49
6 nursing students that live in Mississippi but went
7 to schools outside of Mississippi. They were not
8 included in the study, but we're assuming that
9 they stayed in Mississippi once they took the
10 NCLEX and passed it. That's more -- we're going
11 to be working with the Office of Nursing Workforce
12 to do some surveys to try to find out if we
13 retained a sufficient number of these people in
14 the State of Mississippi. That's a pocket of data
15 that we're missing, but implications for
16 additional study.

17 So I just wanted you all to be aware of
18 that.

19 MS. COLLINS: So, Phyllis, does that
20 prove that kind of on-the-job training and
21 clinical, maybe there's something with the
22 curriculum in nursing school that they might need
23 to adjust to -- maybe more time for clinicals?

24 MS. JOHNSON: Well, you know,
25 clinical, it's something that is very important.

1 COVID has impacted that.

2 When I came out, which was umpteen years
3 ago, we were able to do this prior to taking
4 NCLEX, and I think it helped us. I think that you
5 learned the theory, and you don't know all there
6 is to know until you actually get out there and
7 get your critical-thinking skills and the theory
8 and the practice and put it together, and then
9 you're able to think through the exam questions
10 because the NCLEX is only minimum competency. If
11 you can't pass the minimum competency, that's a
12 concern because I think -- but I think this will
13 help. It looks like it has helped.

14 And there has been -- the industry,
15 healthcare industry, is liking it. And so I think
16 that's important; it's significant. And I think,
17 again, that's a reflection on you all as the Board
18 of Nursing, you know, that we implemented this.
19 We've shown that it's worked based on the research
20 that I've done thus far, and there will be
21 additional studies coming out of this; I'm sure.
22 But I just think it's very significant that we
23 were able to do -- show how many passed NCLEX on
24 first write.

25 MS. CLANTON: Are we the only state

1 that has done this, or is there other states that
2 are doing this?

3 MS. JOHNSON: There are some states
4 that offer temporary nursing licenses; they have
5 different stipulations in accordance with their
6 law. There's been a lot of conversation about --
7 with COVID, because, again, that's another lesson
8 learned, that there are things that have been put
9 in place that probably need to be looked at to
10 continue. And so right now there are some other
11 states that are doing it, but I don't think
12 they're doing it to the extent that we're looking
13 at doing it.

14 MS. CLANTON: So trendsetter.

15 MS. JOHNSON: Right, exactly. That's
16 my word, "trendsetter."

17 MS. COLLINS: Pro-active.

18 MR. CUMMINS: Phyllis, you mentioned
19 the 82 percent pass -- NCLEX pass rate. Do you
20 know a percentage number that that compares to
21 prior to the permit?

22 MS. JOHNSON: Now, Dr. Burks will
23 probably have that information. She's our
24 research-minded person --

25 MR. CUMMINS: Well, just -- just

1 question --

2 MS. JOHNSON: Do you have any idea
3 what the NCLEX pass rate was? Was it -- prior to
4 implementing the temporary permits? It's done
5 different from school to school, I'm sure.

6 DR. BURKS: Yeah, it varies from
7 school to school, but statewide it was in the 80s
8 for the -- for the year -- for the last year - for
9 the 2020 year.

10 MR. CUMMINS: Okay.

11 MR. SHAW: All right. So let's just
12 move right into executive committee report, which
13 this encompasses. Dr. Johnson, you had mentioned,
14 as far as with the temporary permits, you were
15 looking at using state law that's already in place
16 to devise a program under it. How long would it
17 take to get that implemented?

18 MS. JOHNSON: We are fully functional.
19 We are looking to have an effective date of
20 December 1.

21 MR. SHAW: Okay. So I was just making
22 sure we didn't need --

23 MS. JOHNSON: And we're asking for the
24 board to give us that permission as of December 1
25 to incorporate that.

1 MR. SHAW: What we're speaking of is
2 the temporary permits expire December 1 - is what
3 we extended them to - and just wanting to confirm
4 they would have that going before extending.

5 So with that said, coming out of executive
6 committee, would ask that we allow Dr. Johnson to
7 direct the staff to implement a more permanent
8 program around temporary permits.

9 MS. CULPEPPER: I make the motion.

10 MR. ADAMS: Second.

11 MR. SHAW: Motion, Sandra; second,
12 T.J.

13 All in favor?

14 (ALL IN FAVOR.)

15 MR. SHAW: Motion carries.

16 There's one other thing that's come up
17 with questions, and this is just more of a comment
18 dealing with the different organizations that have
19 come out and some of them saying that, you know,
20 if you do misinformation and stuff like that, that
21 there will be questions, and you'll be called in.
22 We already have in our rules and regulations
23 concerning professional conduct. So if there is
24 some type of gross negligence, something like
25 that, that rises to that level, then it can be

1 addressed through that, but at this time, we have
2 no intention of putting out any type of paper or
3 comment about that directly.

4 With that said, that ends executive
5 committee report.

6 I understand this one is fixing to be a
7 little long - compliance committee.

8 MR. ADAMS: Thank you, Mr. President.
9 So we'll make this brief, but compliance committee
10 was very busy today. We took our whole hour and
11 needed a little more time.

12 But I move that the board adopt the
13 compliance committee's recommendation that the
14 following affidavits, formal reprimands be
15 accepted for ratification, license number
16 R-849303.

17 I move that the board adopt the compliance
18 committee's recommendation to deny the request of
19 license R-914993, request for early release from
20 her 24-month probationary period pursuant to the
21 final order dated and signed February 7th, 2020.

22 I move that the board adopt the compliance
23 committee's recommendation to approve the request
24 of license number R-882251, request for
25 modification of the final order dated and signed

1 April 23rd, 2021, of the maximum number of hours
2 allowed to work from 88 hours to 96.

3 I move that the board adopt the compliance
4 committee's recommendation to approve the request
5 of license number R-629871, NP, request for an
6 extension of the requirements of the final order
7 dated and signed June 15th, 2021. The committee
8 is granting a 30-day calendar extension on the
9 \$1,000 from the date of approval. The committee
10 is granting a 90-day calendar day extension of the
11 legal aspects of nursing course from the date of
12 this approval.

13 I move that the board adopt the compliance
14 committee's recommendation to approve the request
15 of license number R-861879, request for
16 modification of the final order dated and signed
17 October 18th, 2019. The maximum number of hours
18 allowed to work from 88 hours to 96 hours.

19 I move that the board adopt the compliance
20 committee's recommendation to approve the request
21 of license number R-860437, request for an
22 extension on the requirements of the final order
23 dated and signed July 20th, 2021. The committee
24 is granting a 30-day calendar extension on the
25 \$500 fine from the date of this approval. The

1 committee is granting a 30-day calendar extension
2 of the ethics course from the date of this
3 approval.

4 MR. SHAW: Is that it?

5 MR. ADAMS: That's it.

6 MR. SHAW: All right. You heard the
7 motion coming out of committee. Any questions?

8 All in favor of accepting the committee's
9 recommendations on the motions before us say,
10 "Aye."

11 (ALL IN FAVOR.)

12 MR. SHAW: Any opposed?

13 (NO RESPONSE.)

14 MR. SHAW: I will want to back up and
15 add something and ask this question. As we're
16 going through here, check the dates of January
17 10th and 11th and January 24th and 25th. That's
18 keeping it on a Monday/Tuesday, as it was before
19 and just see if anybody has any direct conflict at
20 this time with those.

21 MS. CLANTON: Give me those dates
22 again.

23 MR. SHAW: January 10th and 11th and
24 then the 24th and 25th for doing the education
25 session.

1 MS. COLLINS: What days of the week
2 are those?

3 MR. SHAW: Monday and Tuesday.

4 Anyway, we're moving on.

5 Advanced practice committee? I know she's
6 on the phone, but there seems to continue to be
7 problems because she just texted me again, as far
8 as being able to hear.

9 Dr. King, are you there? If not, there's
10 nothing to come out of advanced practice.

11 Practice committee? I don't think
12 practice committee had anything.

13 All right. Administrative code, that's
14 just getting -- taken over --

15 MR. ADAMS: Nothing -- nothing to
16 bring forward.

17 MR. SHAW: Finance. Shan's taken care
18 of that.

19 ONW? You've already spoke to that one.

20 I have a motion we go into closed session
21 to determine if executive session is necessary.

22 MR. ADAMS: Motion.

23 MR. SHAW: I have a motion, T.J.

24 Second?

25 MR. CUMMINS: Second.

1 MR. SHAW: Second, Jeremy.

2 All in favor?

3 (ALL IN FAVOR.)

4 MR. SHAW: All right. We will now go
5 into closed session to determine if executive
6 session is necessary. So everybody get out.

7 (Board entered into closed session at
8 12:15 P.M.)

9 (Board returned from executive session
10 at 12:31 P.M.)

11 MR. SHAW: In executive session, we
12 reviewed information related to employees'
13 performance and adjusted the salaries accordingly.
14 At this time, I would like to ask for a motion to
15 -- or declare us in recess until we return for the
16 full-board appeal. Anybody got any questions? We
17 can step over here.

18 MS. MONTGOMERY: We are in recess.

19 MR. SHAW: So in recess.

20 (Whereupon, above-entitled proceedings
21 recessed at 12:32 P.M.)

22 (Back on the record at 2:33 P.M.)

23 MR. WIGGINS: Mr. President.

24 MR. SHAW: Yes. Back on the record.

25 I understand there's a gentleman on the line that

1 tried to speak at the front of the meeting, but
2 there was some difficulties with being able to
3 hear.

4 Are you still there, sir?

5 UNIDENTIFIED SPEAKER: Yes, I am.

6 MR. SHAW: Go ahead with your
7 question.

8 UNIDENTIFIED SPEAKER: Okay. Yes.
9 Nursing professional organizations have recently
10 come out with a strong statement in support of
11 COVID vaccine mandates.

12 And my question to the board is: If a
13 hospital mandates vaccinations and licensed nurses
14 refuse to participate and refuse vaccination, is
15 that considered unprofessional conduct or would
16 that be eligible for review by the Board of
17 Nursing as a violation of Nurse Practice Acts?

18 MR. SHAW: That would be a legal
19 question that I would not be able to answer at
20 this time. I can get with our counsel and discuss
21 with them on what they would look at as far as
22 that goes. And if you can get us your contact
23 information, I'm sure we can get back with you on
24 that.

25 UNIDENTIFIED SPEAKER: Okay. I think

1 I have the appropriate e-mails, but I was asked to
2 ask that -- I was actually directed to ask that in
3 the public forum, and so I have. And I guess I'll
4 go back to the private e-mail and try to get that
5 answered that way. Thank you.

6 MR. SHAW: I know as a board, it's
7 been discussed as to whether we should come down
8 as some type of regulation and mandate, and we
9 leave that up to each individual organization and
10 hospital as to their decision on that.

11 Thank you, sir.

12 If that is it, I entertain a motion to
13 adjourn.

14 MS. COLLINS: I so move.

15 MR. ADAMS: Second.

16 MR. SHAW: All in favor?

17 (ALL IN FAVOR.)

18 (Whereupon, the above-entitled
19 proceeding concluded at 2:35 P.M.)
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CERTIFICATE OF COURT REPORTERS

I, CYNTHIA HARRIS, Court Reporter and Notary Public, in and for the County of Scott, State of Mississippi, do hereby certify:

That the foregoing pages contain a full, true, and correct transcription of the proceedings taken by me at the time and place heretofore stated;

That I am not kin or in anywise associated with any of the parties to said cause of action or their counsel, and that I am not financially interested in the action.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this the 25th day of October, 2021.



Cynthia Harris
CYNTHIA HARRIS, RPR, CCR 1828

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BUSINESS MEETING

THE MISSISSIPPI BOARD OF NURSING
BUSINESS MEETING

OCTOBER 8, 2021

PROCEEDINGS

taken on Friday, October 8, 2021,
commencing at approximately 11:12 A.M.
at the Mississippi Board of Nursing
713 South Pear Orchard Road
Plaza II, Suite 300
Ridgeland, Mississippi

REPORTED BY: CYNTHIA HARRIS, RPR, CCR, #1828
SOUTHERN STENO REPORTERS
3541 Highway 13 South
Morton, MS 39117
(601) 507-0849

BUSINESS MEETING

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1 APPEARANCES

2

3

4 BOARD MEMBERS IN ATTENDANCE IN PERSON:

5 ALTON SHAW, MSN, FNP-C (PRESIDENT)

6 T.J. ADAMS, RN, BSN, MSHA (VICE PRESIDENT)

7 SANDRA CULPEPPER, LPN (SECRETARY)

8 SHIRLEY JACKSON, LPN

9 NANCY NORRIS-JOHNSON, LPN, II, CPT

10 LACEY T. GENTRY, MSN, RN

11 JEREMY L. CUMMINS, LPN, LHNA

12 JANIE CLANTON, RN

13 JAN COLLINS, CONSUMER

14

15 BOARD MEMBERS IN ATTENDANCE VIA ZOOM:

16 LAURA MOORE, MSN, NP-C

17 MELISSA KING, DNP, FNP-C

18

19

20

21

22

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24

25

ALSO PRESENT:

EDWARD WIGGINS, JR., ESQUIRE

SPECIAL ASSISTANT ATTORNEY GENERAL

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1 PROCEEDINGS

2 * * * *

3 MR. SHAW: We will go ahead and call

4 the meeting to order. I do declare a quorum at

5 this time. I understand we have a few of the

6 board members participating remotely. Could you

7 chime in and state your name?

8 (NO RESPONSE.)

9 MR. SHAW: Can they hear us? Anybody

10 online? Oh, she said she can't really hear me.

11 We understand we have a few members on the phone.

12 If you could please state your name. We've got to

13 cut them up somehow.

14 Now, Melissa, can you try to repeat?

15 DR. KING: I can. How are you?

16 MR. SHAW: All right. We can hear you

17 loud and clear now. Any other board members on

18 the phone?

19 DR. KING: Hey, Alton, if they are on

20 the phone, like I see Laura on there, she is going

21 to have to not just unmute her phone, but hit star

22 6 for the first time and then mute her phone back

23 in order for you to hear her.

24 MS. MOORE: I'm on Zoom on my

25 computer. This is Laura.

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1 MR. SHAW: Okay, cool. So we have

2 Melissa King and Laura Moore participating

3 remotely. We have a quorum together.

4 Ms. Jackson, would you mind opening us up.

5 MS. JACKSON: I will. Thank you.

6 Good morning, everyone. If you will please bow

7 your heads.

8 (PRAYER.)

9 MR. SHAW: All right. Approve the

10 agenda. Do I have a motion we approve the agenda?

11 MR. ADAMS: Make a motion we approve.

12 MR. SHAW: Motion, T.J.

13 Second?

14 MS. NORRIS-JOHNSON: I second.

15 MR. SHAW: Second, Ms. Nancy Norris-

16 Johnson.

17 All in favor?

18 (ALL IN FAVOR.)

19 MR. SHAW: Motion carries.

20 Open forum. Any members of the public

21 care to make a comment? We'll give a moment in

22 case there's anybody on Zoom.

23 MS. JOHNSON: Mr. Chair, while we're

24 waiting for the public comment, this is your

25 opportunity if you have e-mailed me or called me,

BUSINESS MEETING

1 and you have a report to submit. I do know that
2 Eliza Pillars wanted to submit a report this
3 morning. I think their president, Yolanda Murry,
4 and Dr. Audwin Fletcher are on the call. So this
5 is your opportunity at this time to present your
6 report.

7 MS. MURRY: Good morning. Greetings
8 from Eliza Pillars Registered Nurses of
9 Mississippi. I am Yolanda Murry, registered
10 nurse, family nurse practitioner, with over 27
11 years of nursing experience.

12 I am the 18th state president of Eliza
13 Pillars Registered Nurses of Mississippi. I was
14 sworn in virtually on May 1st, 2021, to serve in
15 this capacity.

16 I am an active member of Mississippi
17 Nurses Association and a proud member of Alpha
18 Kappa Alpha Sorority, Incorporated.

19 I was born and raised in the small town in
20 the Mississippi Delta named Beulah. I currently
21 live in Hernando, Mississippi.

22 Eliza Pillars was founded by Eliza Pillars
23 in 1945 and remains the first African-American
24 nursing organization.

25 We are currently serving the State of

1 ways possible.

2 Our upcoming events of Eliza Pillars
3 Registered Nurses of Mississippi: We are
4 (indiscernible) February 19, 2022, welcome to our
5 annual February Update, hosted by our district II,
6 Greenville, Mississippi - the chapter that I am
7 in. Our Update will be face-to-face or virtual if
8 the COVID-19 (indiscernible).

9 Continue to view our web page for upcoming
10 events. Our annual convention, dated April 28th
11 through May 21st -- May 1st - I'm sorry - 2022 in
12 Biloxi - planning it has began {sic}, and it will
13 be in-person, but virtual will be an option.

14 We achieved our very first virtual update
15 and convention this year.

16 As nurses, we have tapped into technology
17 like none before.

18 In closing, I would like to invite the
19 Mississippi Board of Nurses to our annual
20 convention to keep us updated on protecting the
21 public and the great job everyone is doing.

22 Joining me today is Dr. Fletcher, which is
23 our treasurer, and Ms. Bess Blackwell, which is
24 the secretary.

25 Thank you for allowing us the opportunity

1 Mississippi in districts. We have five active
2 districts: district I, Tupelo; district II,
3 Greenville; district IV, Jackson; district V,
4 Meridian; and district VI, Natchez. We currently
5 have two inactive districts, hoping to activate
6 those during this tenure.

7 Our mission and values are guided by
8 Ms. Pillars' own inspiration. Our motto, "An
9 organization dedicated to excellence in
10 healthcare." Our mission and values remain
11 constant, even throughout these last two years of
12 our global pandemic of COVID-19.

13 How do we continue to carry out this
14 mission? By service. Community services are
15 reflective of Ms. Pillars' life, giving back to
16 the community through health and education
17 services are very important to the membership.

18 PEARL project: Prevention, education,
19 advocacy, referral, living healthy. In the midst
20 of the pandemic, we are still able to fulfill this
21 mission by providing community vaccine drives,
22 educating the public about vaccines, masking up,
23 social distancing. And kudos to all the nurses
24 that are on the front line and behind the scenes
25 producing data for research or assisting in any

1 to serve. And if any questions, please do so at
2 this time. Thank you.

3 MR. SHAW: Thank you for that report.
4 Anybody have any questions?

5 Thank you again for that, and what you do.
6 Are there any other members of the public
7 that would like to make a comment?

8 (NO RESPONSE.)

9 MR. SHAW: If not, move on to ONW.

10 MS. CULPEPPER: I'm going to --

11 MR. SHAW: You're going to speak on
12 it?

13 MS. CULPEPPER: Yes, because I need to
14 bring something to the board.

15 MR. SHAW: Okay.

16 MS. CULPEPPER: So, Mr. President, I
17 would like to make a motion that we approve the
18 \$792,500 be released to the nursing schools for
19 scholarship funding at this time.

20 MR. SHAW: Any questions on that?

21 (NO RESPONSE.)

22 MR. SHAW: If not, we have a motion to
23 go ahead and pay the scholarships out of the ONW
24 fund. Do I have a second?

25 MR. CUMMINS: Second.

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1 MR. SHAW: Second.
 2 All in favor?
 3 (ALL IN FAVOR.)
 4 MR. SHAW: And motion carries.
 5 UNIDENTIFIED SPEAKER: Yes. I finally
 6 got signed in. I have a question whenever it's
 7 appropriate.
 8 MR. SHAW: Okay, go ahead. Who is
 9 this?
 10 UNIDENTIFIED SPEAKER: Yeah, so...
 11 MR. SHAW: We're having trouble
 12 hearing. We've heard a couple of things and
 13 that's it. Is this Andrea?
 14 UNIDENTIFIED SPEAKER: This is
 15 (indiscernible). I'm signed in on my mom's
 16 computer.
 17 Okay. My question is that many nursing
 18 professional organizations signed on to a -- Okay.
 19 Can you hear me now?
 20 MR. SHAW: Yes.
 21 UNIDENTIFIED SPEAKER: Yeah, many
 22 professional nursing org--
 23 MR. SHAW: And it's gone away again.
 24 We'll go on through the agenda, and once we get to
 25 the end, we'll try to see if we can get back in

1 touch and let you speak then.
 2 Moving on right now. Dr. Burks.
 3 MS. JOHNSON: Did you have a motion?
 4 MR. SHAW: Yeah, we've already taken
 5 care of that one.
 6 DR. BURKS: Good morning, everyone.
 7 For PN education, I have three items to
 8 bring forward to the board. The first item is
 9 Holmes Community College. They submitted a
 10 proposal request to offer a part-time night and
 11 weekend program.
 12 This proposed program, it would utilize
 13 option 5 as outlined in the Community College
 14 Board curriculum.
 15 The option 5 coursework, it will begin in
 16 the summer, and it will continue for five
 17 consecutive semesters with the class completing in
 18 December.
 19 They also have a request to increase PNV
 20 1144, {sic} which is a fall course - to increase
 21 that by one hour.
 22 They have a plan to admit 30 students per
 23 year, and this will be on the Ridgeland campus.
 24 They typically have a program there, and it also
 25 admits 30 students annually.

1 They have a hybrid program that was
 2 approved a while back, and they admit 15 students
 3 every other year in August.
 4 Recently, they had 861 students district-
 5 wide to apply for the PN program.
 6 MR. SHAW: Excuse me, Dr. Burks. The
 7 ones on the phone are having trouble hearing you.
 8 DR. BURKS: Okay. Is that better?
 9 MR. SHAW: I don't know; they'll tell
 10 me in a minute.
 11 DR. BURKS: The Holmes Community
 12 College -- and their district, they had 861
 13 students to actually apply for the program. 113
 14 did not meet their admission requirement; however,
 15 748 students did.
 16 The Grenda campus, they had 290
 17 applicants. They only accepted 30 students.
 18 Kosciusko had 120; they only accepted 30.
 19 And Ridgeland had 419 applicants, and they
 20 only accepted - excuse me - 30 students.
 21 They did have documented letters of
 22 support from their community and their clinical
 23 partners, and that information is available if
 24 needed.
 25 They completed a survey, and their survey

1 demonstrated there was a need for additional
 2 options in that area.
 3 They have support from their campus
 4 administrative team as well.
 5 Their licensure pass rate for the last
 6 three years: In 2018, they had 100 percent pass
 7 rate on boards; '19, 84 percent; and 2020, they
 8 had 100 percent pass rate on boards.
 9 The recommendation is: Holmes, if they
 10 were given permission to offer that program, they
 11 will need to refer that increase for credit hours
 12 from PNV 1114 {sic} to MCCB. They will be
 13 required to adhere to the standards of a PN
 14 accreditation, as well as provide the Board of
 15 Nursing with an outcome status report, and this
 16 will be done six months after the initial class
 17 graduates.
 18 The second item I have is from Mississippi
 19 Gulf Coast Community College.
 20 MR. SHAW: Dr. Burks, just a second.
 21 Does anybody, before we move on to another one,
 22 have any questions on this one?
 23 MS. COLLINS: What is their ask? I'm
 24 sorry. What is their ask of us? Did I miss that?
 25 DR. BURKS: They're asking to offer a

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1 part-time program. They already have a --
2 MS. COLLINS: Okay. Yeah, I heard
3 that at the beginning. But we have to give them
4 approval to do that?

5 DR. BURKS: Yes.

6 MR. SHAW: Before we get into the
7 other ones, anybody have any other questions on
8 this one?

9 (NO RESPONSE.)

10 DR. BURKS: Mississippi Gulf Coast,
11 they have submitted a proposal request to offer a
12 healthcare apprenticeship program for practical
13 nursing.

14 This proposed program -- it includes the
15 traditional training, and it actually emphasizes
16 on-the-job learning.

17 Memorial Hospital and Singing River Health
18 Systems, they're going to partner with Mississippi
19 Gulf Coast if they are able to offer this program.
20 And both of these facilities have been approved by
21 the United States Department of Labor to
22 participate in the apprenticeship training in
23 healthcare.

24 The site of this program is going to be
25 the Bryant Center.

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1 And their proposed class size, because
2 this is an apprenticeship program, is going to be
3 10.

4 Their licensure pass rate for the last
5 three years has been 100 percent, and they receive
6 support from the healthcare facilities.

7 The thing that Memorial Hospital and
8 Singing River is going to do, if they're allowed
9 to do this, is those individuals who are part of
10 that program, they're going to offset and pay the
11 tuition for those individuals, while also
12 providing them with jobs during that time. So
13 they'll get paid for a job, and they'll also pay
14 for their tuition.

15 They do have a set of requirements for
16 that apprenticeship program, and they are listed,
17 which is very similar to all the schools in the
18 state.

19 This apprenticeship program, it is very
20 tedious in nature. I've supplied you all with a
21 crosswalk of the curriculum. So if you look at
22 the crosswalk of the curriculum, you'll notice
23 that it outlines the Mississippi Community College
24 Board curriculum, in addition to what this program
25 is going to look like as an apprenticeship.

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1 Again, the focus is on, on-the-job
2 learning. So the first 16 weeks, they're going to
3 have 248 hours. It's going to be a second 16
4 weeks, which, again, is 248 hours. The third and
5 the fourth 16 weeks are also going to be 248
6 hours.

7 They're going to have the expanded role
8 integrated throughout this apprenticeship model,
9 which is one of the requirements as well.

10 The recommendation is that they be given
11 permission to pilot this apprenticeship program,
12 and they will also be required to adhere to the
13 standards of the practical nursing accreditation.

14 The course modules and objectives, it must
15 reflect the integration of IV therapy, since that
16 is a part of that expanded role. And their
17 transcripts must reflect the equivalent courses
18 that are required for completion in the State of
19 Mississippi. They are to notify the board of any
20 changes in their classroom location because this
21 is an apprenticeship program. If they opt to
22 teach classes within the healthcare facilities, we
23 would need that information because those
24 classrooms would have to be evaluated to make sure
25 they adhere to the standards and guidelines in

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1 terms of size.

2 In addition, they need to also provide the
3 Board of Nursing with a status report, and my
4 recommendation, it's to be done after the second
5 16 weeks and, hereafter, after those individuals
6 complete that class.

7 MR. SHAW: Any questions on that one?

8 MS. CULPEPPER: I do. Dr. Burks --

9 DR. BURKS: Yes, ma'am.

10 MS. CULPEPPER: -- forgive me, but I
11 recall this. This looks very familiar, and I
12 believe we kind of saw a different take on this at
13 the last board meeting.

14 DR. BURKS: It's a different one.

15 MS. CULPEPPER: I know, but it still
16 addresses medical assistants. It does not tell us
17 that they are certified. And they're still
18 wanting to kind of do the same thing; it appears.
19 However, once again, we have no regulation over
20 medical assistants. And to bring them in and give
21 them credit hours towards something that we have
22 no regulation over is still a point of contention
23 for me.

24 DR. BURKS: The apprenticeship program
25 is --

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1 MS. JOHNSON: Different.

2 DR. BURKS: -- different than them
3 wanting to do the medical assistant. With the
4 apprenticeship program, they're not going to
5 receive any credit for prior learning.

6 MS. CULPEPPER: So where it has in
7 here -- and I just want to make sure that I
8 clarify because, once again, I will refer back to
9 -- it talks about prior-learning-credit hours over
10 here on this second section - referring back to
11 the July meeting.

12 DR. BURKS: That's the third thing.

13 MS. JOHNSON: That's the third thing.
14 That's totally different. It's two different
15 things.

16 MS. CULPEPPER: Okay.

17 MS. JOHNSON: You're talking about
18 another program. She's going to talk about that
19 after this.

20 MS. CULPEPPER: Okay. So I just want
21 to clarify that they're not getting credit as an
22 MA.

23 DR. BURKS: No.

24 MS. CULPEPPER: And is this more
25 geared toward MAS? CNAs? Or is this going to

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1 difference is instead of them doing a year,
2 they're going to enter into a contract. This is
3 15 months; it is very tedious. But that focus is
4 going to be placing them in that clinical setting.

5 Right now, for example, first-semester
6 students in the practical nursing program, they
7 have a total of 75 clinical hours, which most
8 people say, "Well, by the time they get in, start
9 learning, that learning experience is over."

10 And if you see with this model, it's
11 basically triple that on-the-job experience and
12 that clinical. So that's the focus of this.

13 But it's going to be open to anyone that
14 meets that criteria.

15 They'll have to have an age -- criminal
16 background check and the ATT in addition to the
17 TEAS, which is the standard admission criteria for
18 most of the schools.

19 MR. SHAW: We're still having a
20 technical issue where nobody can hear. I don't
21 know how to cut that mic up. There's got to be
22 some buttons to punch somewhere to make it more
23 sensitive and to turn up the volume.

24 MS. MONTGOMERY: I think they just
25 want her to speak up a little louder.

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1 encompass everyone?

2 DR. BURKS: This encompasses everyone.
3 The only difference is they have more on-the-job
4 -- they're going to have more clinical hours with
5 their apprenticeship program.

6 What they've done is they have modeled
7 this program off of Louisiana. Louisiana started
8 an apprenticeship program several years ago, and
9 that program has been successful. So what they
10 have done is, they've taken that Louisiana model,
11 and they've created this model.

12 I spoke with Louisiana Workforce to see
13 how did they do. I also spoke with the board of
14 nursing, and I've had meetings with Ochsner
15 because Delgado Community College in Louisiana,
16 they have partnered with Ochsner to create this
17 program.

18 And it is a little different in terms of
19 that clinical component because one of the things
20 that we find is people complain about students
21 graduating and not having enough clinical
22 experience. So this is going to provide them with
23 clinical experience. And the amount of time is --
24 the traditional program is 12 to 15 months. This
25 is going to be a 15-month program. So that

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1 MR. SHAW: Well, she'll be yelling
2 then. It's not you. It's this thing here.

3 MS. CULPEPPER: And so thank you for
4 clarifying that --

5 DR. BURKS: Yes, ma'am.

6 MS. CULPEPPER: -- because that does
7 make a difference. And I get where that's going.
8 So I appreciate you clarifying that section
9 because when I was reading it, that was my concern
10 was making sure that we're encompassing everyone
11 that has the ability to enter this type of
12 program.

13 DR. BURKS: Yes, the apprenticeship
14 will encompass everyone; it's not focused just on
15 medical assistants. But they will have to meet
16 that admission criteria in order to be a part of
17 this program.

18 And that's the thing as well -- I forgot
19 to mention that. They're going to sign contracts
20 and have specific contracts because it is so
21 tedious that they understand the expectations of
22 this because the hospitals are willing to commit
23 to these individuals in paying their tuition as
24 well as allowing them to work in their facilities
25 and pay them a paycheck while they navigate this

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1 program.
2 And their goal is hopefully once they do
3 this, those individuals will stay there and work
4 as nurses because they're vested, and then they
5 will return to school, transition to become RNs.

6 MS. COLLINS: But they're not
7 obligated to hire them after it's over with;
8 right?

9 DR. BURKS: Yes, that's going to be
10 their plan. They want them to stay.

11 MS. COLLINS: What if they get in
12 there, and they don't like their...

13 DR. BURKS: All of that is going to be
14 outlined in their contracts.

15 MS. CLANTON: And I do have a
16 question. What is their -- what is the college's
17 -- what's their target market for this? Is it the
18 high school students that are thinking that they
19 want maybe to come into the nursing program, or is
20 it workforce development, you know, people out of
21 a job?

22 DR. BURKS: It's pretty much workforce
23 development because you have individuals that are
24 working in the facilities; they desire to be
25 nurses, but they cannot afford to quit their jobs

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1 to --

2 MS. CLANTON: Okay.

3 DR. BURKS: -- commit to a program.
4 So this is an opportunity for -- under workforce
5 for them to help those people who have a desire.
6 And -- because we know, for example, you have --
7 I'm going to use the group CNAs. There are a lot
8 of facilities that have wonderful CNAs; they would
9 love to go back to school, but financially, it's
10 not realistic for them. So that's the group that
11 they're looking at and focusing on those
12 individuals who are in the workforce. It doesn't
13 matter what department they're in, but they have a
14 desire, have the ability, and can meet the
15 admission criteria.

16 MS. CLANTON: Okay.

17 MR. CUMMINS: Dr. Burks, is the -- and
18 just to recap real quick. Is the prerequisite and
19 admission requirements the same as the traditional
20 class?

21 DR. BURKS: Yes.

22 MR. CUMMINS: It's the same
23 prerequisites. And then as far as classroom
24 hours, will they {sic} be any classrooms hours at
25 all, or is this 100 percent on-the-job?

Page 24

1 DR. BURKS: No. There are classrooms.
2 They have the theory component, but they're going
3 to be in the classroom.

4 MR. CUMMINS: Oh, I'm sorry. I didn't
5 see that.

6 MS. CLANTON: "Lecture."

7 MR. CUMMINS: Okay, okay. All right.
8 Thank you.

9 DR. BURKS: It's just that they're
10 going to have more of the clinical component.
11 It's going to increase those clinical hours.

12 Yes. They have to pass NCLEX --

13 MR. CUMMINS: Right.

14 DR. BURKS: -- to become LPNs.

15 MR. CUMMINS: You mentioned a -- of --
16 of -- of talking back and forth with Louisiana
17 school doing this. Are their NCLEX rates -- what
18 do their success rates look like?

19 DR. BURKS: 100 percent.

20 MR. CUMMINS: Okay.

21 MR. SHAW: So any other questions on
22 this specific one?

23 (NO RESPONSE.)

24 MR. SHAW: All right. Now, we get to
25 move on to the other one.

Page 25

1 DR. BURKS: Yes, sir. The last
2 item -- this is a follow-up on the request from
3 the July 2021 meeting for Mississippi Gulf Coast
4 Community College. They requested to offer that
5 medical assistant to the PN option. And I just
6 did a recap and placed that information on there
7 that will show their proposed request, in addition
8 to the program hours and what's outlined in the PN
9 curriculum.

10 The question asked from the board was
11 regarding the proprietary schools: Were they
12 required to adhere to the framework? Those
13 schools are not required to follow the established
14 curriculum by -- that the community colleges use.

15 If those schools are not accredited, they
16 may follow the guidelines set by any certification
17 company; for example, they use CCMA, NHA. There
18 are no laws or regulations that could make the
19 proprietary schools utilize MCCB curriculum. They
20 use the industry standards; those programs have no
21 set time frame, MCCB curriculum. They even have a
22 one-year program or a two-year, and that's
23 dependent on if the students are going to receive
24 a technical certificate, or if they're going to
25 receive their degree afterwards.

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1 So from the proprietary standpoint, the
 2 program could be four months, six months, nine or
 3 up to a year. And then there's no required total
 4 contact or program hours. So the amount of time
 5 they stay in class is varied.

6 If they are accredited, they follow the
 7 quality standards set by the accreditors.

8 My concerns are still, as before: This
 9 curriculum, it differs from the approved,
 10 standardized curriculum. This request includes a
 11 hybrid format. The traditional program is 100
 12 face-to-face. They want students to utilize prior
 13 learning credit, which is not an option with the
 14 traditional PN program. And it is slightly
 15 revised in terms of how they teach that
 16 information as it relates to IV therapy.

17 MR. SHAW: All right. Any questions
 18 on that?

19 MS. CULPEPPER: I will still refer
 20 back to we have no regulation over MAs. And for
 21 -- my point of contention on this is we don't know
 22 what they've been out there doing. There's no
 23 reporting body, and we're going to allow them to
 24 have an easy access into a nursing program, in
 25 which at the end of the day, we will be

1 responsible for. And that is an issue to me.

2 Now, if we're talking about someone that's
 3 certified and is being regulated, I'm more open to
 4 that discussion. But if we're not, we're going
 5 into an area that I'm not comfortable with, if
 6 that makes sense.

7 Are they open to the discussion of doing
 8 this differently?

9 DR. BURKS: I had asked that question
 10 before to them, and they really wanted to go with
 11 the model in which they presented.

12 MR. SHAW: All right. So we will
 13 address them individually. On the first request
 14 for Holmes Community College to offer a part-time
 15 night and weekend program for the LPN, do I have a
 16 motion to approve that?

17 MS. NORRIS-JOHNSON: I make a motion.

18 MR. SHAW: I have a motion, Ms. Nancy
 19 Norris-Johnson.

20 MR. CUMMINS: Second.

21 MR. SHAW: Second, Jeremy.

22 All in favor?

23 (ALL IN FAVOR.)

24 MR. SHAW: Motion carries.

25 Next we have the Mississippi Gulf Coast

1 Community College proposal to offer a healthcare
 2 apprenticeship program for the practical nursing.

3 Do I have a motion that we approve that
 4 apprenticeship program with their past 100 percent
 5 pass rate?

6 MS. JACKSON: I make a motion.

7 MS. CULPEPPER: I will second it.

8 MR. SHAW: Ms. Jackson. Ms. Culpepper
 9 second.

10 All in favor?

11 (ALL IN FAVOR.)

12 MR. SHAW: Motion carries.

13 For the last one, there still seems to be
 14 questions on this. So I think to put it to rest
 15 and say that this is not going to work like this.

16 Do we have a motion to deny this request?

17 MS. CULPEPPER: I will make the motion
 18 to deny.

19 MS. JACKSON: I second.

20 MR. CUMMINS: I second.

21 MR. SHAW: I have a motion and a
 22 couple of seconds. Take your pick. I think
 23 Ms. Jackson spoke first.

24 All in favor?

25 (ALL IN FAVOR.)

1 MR. SHAW: Motion carries for denial.

2 Thank you, Dr. Burks.

3 DR. BURKS: Thank you all.

4 MS. COLLINS: Is this the first year
 5 we've had all of those requests? Was this
 6 prompted by COVID?

7 MR. SHAW: I think it's prompted by a
 8 lot of things. But, you know, really just now
 9 we're getting into the meat and bones of us taking
 10 over that curriculum, so we'll have more of that
 11 coming up.

12 MS. CULPEPPER: Thank you, Dr. Burks.

13 MR. SHAW: All right. Let's get the
 14 formalities out of the way.

15 The business meeting minutes July 23rd.
 16 Have a motion to accept?

17 MR. ADAMS: Make a motion.

18 MR. SHAW: Motion from T.J.
 19 Second?

20 MR. CUMMINS: Second.

21 MR. SHAW: Second, Jeremy.

22 All in favor?

23 (ALL IN FAVOR.)

24 MR. SHAW: Motion carries.

25 Agreed settlement proposals to accept July

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1 2021.
2 MR. ADAMS: Make a motion.
3 MR. SHAW: Motion, T.J.
4 MR. CUMMINS: Second.
5 MS. COLLINS: Second.
6 MR. SHAW: Second, Jeremy.
7 All in favor?
8 (ALL IN FAVOR.)
9 MR. SHAW: Board hearing panel minutes
10 from June and July 2021. Accept those?
11 MR. ADAMS: Make a motion.
12 MR. SHAW: Motion, T.J.
13 MR. CUMMINS: Second.
14 MR. SHAW: Second, Jeremy.
15 And waive reading and names on motions.
16 MR. ADAMS: Make a motion.
17 MR. SHAW: Motion, T.J.
18 MR. CUMMINS: Second.
19 MS. JACKSON: Second.
20 MR. SHAW: We'll give this one to
21 Ms. Shirley.
22 All right. Ms. Jackson, second.
23 All in favor?
24 (ALL IN FAVOR.)
25 MR. SHAW: All right. Agreed

1 settlement proposals upcoming December 7th.
2 Disciplinary hearings 8th and 9th, and the
3 business meeting will be December 10th.
4 The panel members for this upcoming one
5 are T.J. Adams, Nancy Johnson, Shirley Jackson,
6 and Janie Clanton.
7 Legislation: Trey, whatcha got?
8 MR. BOBINGER: All good. We'll start
9 off talking about on a high note, marijuana,
10 medical marijuana. Actually, I think most of
11 y'all are probably tired of hearing about medical
12 marijuana, as are the governor, lieutenant
13 governor, speaker, members of the legislature.
14 However, it's out there.
15 I got to visit personally with the
16 lieutenant governor last evening, and also with
17 Speaker Gunn; I was at a small gathering of folks.
18 And yesterday afternoon the speaker and
19 lieutenant governor sent a notice to Governor
20 Reeves stating that they had reached an agreement
21 on the terms of the medical marijuana bill. It's
22 been a back and forth. I mean, everybody thought
23 it was going to be somewhat easy, but it's really
24 been a lot of back and forth; it's taken some
25 time.

1 But, you know, Speaker told me very
2 clearly they had agreed on terms, and that
3 something was sent to the governor yesterday.
4 In our Constitution, the governor has
5 total control whether or not to call a special
6 session, and he also controls what goes on in that
7 special session. So now it'll be up to Governor
8 Reeves to determine if and when he will call a
9 special session. I assume that he will. I would
10 think it would be in the near term, but,
11 obviously, we'll let him make that call. So I'm
12 not going to try to guess it. But I would think
13 it would be in the near future.
14 Just as a side note, I could go through
15 the terms. I shared the draft bill with Phyllis
16 and Shan and Brett and some of our people out here
17 a couple of weeks ago. But I think nurse
18 practitioners would be included in issuing
19 certificates or certifications, like physicians,
20 for people to go and purchase at these so-called
21 dispensaries that would be located in various
22 communities around the state. Of course, that's
23 permissive, not mandated, of course. So I just
24 wanted to mention that as a side note. So we'll
25 see what happens. There's a lot to it.

1 I mean, I think everybody you talk to, if
2 you talk in terms of medical marijuana and
3 treating children and cancer patients, I think
4 there's a lot of support. Where it can get --
5 Phyllis, as we discussed, a little more out there
6 is people that may want to be using it for more
7 minor problems or other things. But I think the
8 legislature, from the draft I saw - and it's
9 subject to change, obviously - it looks like they
10 worked hard to try to tighten all that up.
11 This is much tighter than the initial
12 Initiative 65, which the Supreme Court struck that
13 down; that's what kicked it back to the
14 legislature. So we shall see.
15 On a good note, and I was mentioning our
16 director earlier last evening; I was talking to
17 the lieutenant governor. He has got a bill
18 drafted already dealing with additional
19 compensation for nurses due to the COVID and the
20 extremely difficult working conditions and
21 retention. He used the word, "Trying to keep
22 these people."
23 And I know the Board of Nursing and
24 Phyllis and our staff have worked very hard, along
25 with the board. We want to keep our people here.

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1 We want to encourage new people into the
2 profession. But this may be a good way to do it.
3 So there's been a bill drafted. Lieutenant
4 Governor - I can tell you - he's serious about it;
5 he wants to move it. I would think Speaker Gunn
6 in the house would be open to this; I really do.
7 I think we'll get support. I think they will
8 probably use some of the COVID monies; we call
9 them the ARP monies, the American Recovery Plan
10 monies, for that. So I think that potentially is
11 good news for us.

12 Something that I had not heard before - I
13 think we've talked about it in the past - is the
14 lieutenant governor last evening also mentioned he
15 has drafted a bill or had a bill drafted - I
16 should say - to incentivize our nurses to stay in
17 state, and just as the physicians have had a
18 program for several years. You know, "We'll pay
19 your education or subsidize your education
20 expenses or costs if you agree, say, three, four
21 years to stay in Mississippi."

22 And he's got a bill drafted to do that for
23 nurses, so I was really excited to hear that. I
24 think that's a very positive thing. And he
25 seems -- he doesn't seem superficial in my

1 discussion. He seems committed to wanting to do
2 that. So I think that would be very positive for
3 our profession. So that's something we'll be
4 looking for this session.

5 MR. SHAW: Is there any way to cut on
6 the mic or cut it up or do anything? Because we
7 hear you here, but nobody else is hearing you on
8 the phone. That doesn't seem to raise any volume
9 either.

10 MR. BOBINGER: That doesn't?

11 MR. SHAW: Even the remote one, we
12 still hear the same amount. I can't hear any
13 extra.

14 MS. COLLINS: I've got a question when
15 you get through.

16 MR. BOBINGER: Yes, go ahead.

17 MS. COLLINS: Okay, Trey. Would that
18 also include some additional compensation or
19 training for the nurse educators? From my
20 understanding, the problem in the past has been
21 there aren't enough nurses -- nurse educators to
22 teach these students. Would it encompass
23 anything?

24 MR. BOBINGER: I have not seen a
25 draft. The lieutenant governor did not mention.

1 My feeling was it was more about the frontline
2 workers in our hospitals and clinics. Certainly,
3 I agree with you. I think we've got to keep
4 competent and sufficient numbers of nurse
5 educators. I don't know that this will address
6 that. But once the draft comes out, I can see
7 precisely what the language is. If it is, I'll
8 certainly let the board know that, but I think it
9 was more targeted to the people actually in the
10 hospitals and working.

11 Another interesting issue that greatly
12 impacts healthcare in Mississippi is this Medicaid
13 expansion. You guys know there's some strong
14 feelings on both sides of this issue. But I'm
15 hearing more and more talk from legislators, both
16 parties, about doing something. Some people don't
17 like the term "Medicaid expansion." It may be a
18 form of that or something to help expand those
19 that are not covered currently by some type of
20 healthcare.

21 Obviously, the state has to be fiscally
22 responsible. But, you know, Mississippi, you
23 know, we get almost a 4-to-1 match; it's between 3
24 and 4 to 1. So every dollar we put in, we get
25 almost 4 back, but you still have to look at that

1 dollar that you've got to put in. So having said
2 that, I know the lieutenant governor is at least
3 open to discussion or dialogue about some form of
4 expansion. I can't speak, you know, how far that
5 will go or what it would do, but I think he's open
6 to it. And I'm just starting to sense the
7 Mississippi Hospital Association has been out
8 front pro-Medicaid expansion.

9 Now, Mississippi State Medical recently, I
10 think, came out and made some statements that I
11 think it looks like they may engage to some degree
12 on being supportive of Medicaid expansion.

13 But there again, we'll just have to watch
14 and see, but I did want to mention that. I do
15 anticipate we're probably going to have some
16 hearings later in the fall - probably Senate
17 Public Health Committee. This is just what I'm
18 reading between the lines that we may have some
19 hearings later to discuss this issue and related
20 issues. So I'll keep the board posted.

21 Last but certainly not least, another
22 thank you to Shan for all of her good work on the
23 budget. Phyllis' input, working and those guys
24 and all of our staff putting together an excellent
25 budget request to the legislature. I can assure

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1 you - and Ms. Collins knows with William, her son
 2 working there - these budgets are not just merely
 3 glanced over. They're analyzed line by line,
 4 which is crucial. Because we've worked hard and
 5 had folks putting it together, we've been engaged
 6 at the Capitol, we've done well with our budget.

7 And legislature, I thank them and the
 8 leadership for working with us on our budget. But
 9 I wanted you to know there's a lot that goes into
 10 it, and I think you've got a very strong budget
 11 request that we're going forward with in this next
 12 '22 session.

13 That concludes my report. If anyone's got
 14 a question, I'll be happy to answer it.

15 MR. SHAW: Any questions?
 16 MR. BOBINGER: Thank you.
 17 MR. SHAW: All right. Executive
 18 director report.

19 MS. JOHNSON: Good morning.
 20 MR. SHAW: Good morning.
 21 MS. JOHNSON: My report will be brief.
 22 You have it before you, and hopefully everyone - I
 23 do apologize for those that are on Zoom.
 24 Hopefully you can hear me. My voice tends to
 25 carry.

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1 MR. SHAW: It's picking up a little
 2 bit.

3 MS. JOHNSON: So we will try to
 4 rectify that situation going forward. But you do
 5 realize that we are having hybrid meetings. So
 6 there are -- so you can attend in-person, but we
 7 do limit our number. Going forward, if there are
 8 individuals that would like to attend in-person,
 9 please e-mail me, and I will let you know whether
 10 you will be able to attend, based on the number.

11 With numbers going down with our COVID
 12 situation, hopefully, we'll be able to allow more
 13 individuals in. But I do apologize for the
 14 inconvenience.

15 Going forward, just a few updates. One of
 16 the things that I would like our board members --
 17 and, again, thank you for your leadership and all
 18 that you do each and every day, board members.

19 The Board of Director's retreat, you know,
 20 we had this unfortunate weather situation to
 21 occur, and we had to postpone that. And we would
 22 like to reschedule that. So we're asking the
 23 board members to give us a date. I've spoken with
 24 the Chair about this prior to the meeting. We're
 25 looking at January as being a good time because

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1 that's an off month for us to hold hearings, and
 2 that would give you all enough time to schedule if
 3 you could come to a conclusion today because we
 4 need to, again, lock in a venue for the board
 5 retreat. And I think it's very important that we
 6 go forward with the retreat. We do have some
 7 excellent speakers that are still waiting on us to
 8 get back with them on a proposed date because
 9 their schedule gets booked pretty quickly. So I
 10 would indulge the board to please try to give us a
 11 date as to when we could have the retreat, at
 12 least today.

13 The second thing is, there are some kudos
 14 in play. I am so proud of our Board of Directors
 15 and our staff.

16 Ms. Nancy Norris-Johnson has been
 17 appointed to the NCSBN Nurse Licensure Compact
 18 Training and Education committee, and we're
 19 extremely proud of that. In addition, one of our
 20 staff members, Dr. Burks, has been appointed to
 21 the NCSBN Nurse Licensure Compact Research
 22 committee.

23 And we have other staff that are also --
 24 Ms. Culpepper, who is a board member, as well as
 25 Sheron Russell, who is one of our staff members,

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1 have been selected to the National NCLEX Item
 2 Review and Development committee.

3 So I am so proud of our Board of
 4 Directors, our staff for being involved at the
 5 national level. It speaks volumes about the
 6 leadership that you all provide for the State of
 7 Mississippi, and we're at the table. And so I
 8 think that's very important. So I encourage those
 9 that have not -- even our new members going
 10 forward, and I'll send you that information now;
 11 that if you are interested, now is the time to get
 12 involved.

13 I also would like to recognize Mr. T.J.
 14 Adams, who is our board member. T.J. received a
 15 promotion as administrator at North Mississippi
 16 Medical Center in Tupelo. So we are indeed proud
 17 of him and his accomplishments.

18 MR. ADAMS: Thank you.
 19 MS. JOHNSON: Again, it speaks volumes
 20 to the leadership we have on the board. So
 21 congratulations to each and every one of you for
 22 those accomplishments.

23 The other thing that I would like to bring
 24 forward is MEC Hobnob. That will be conducted
 25 October 28th from 8:30 to 1:00. If you are

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1 interested - I know it's short notice, but we just
2 got the e-mail, I think, yesterday or the day
3 before it was sent to me. We do attend that. We
4 are members of the MEC, and we will be sponsoring
5 a table for that event. It will be held at the
6 Mississippi Coliseum this year. They are going
7 back to face-to-face. So it's an excellent
8 opportunity to meet your legislators, to hobnob,
9 and network with other industry and business. But
10 this is an excellent opportunity. Highly
11 encourage it. If you're able to attend, please
12 send an e-mail to Vanessa Gray, my executive
13 assistant, or me; you can cc me on that, and we
14 will make sure that we get the appropriate number
15 of seats so that you can attend. If you've never
16 gone, I highly encourage you, if you can,
17 participate in it. It's a great event.

18 You see on the board visibility, we've
19 been very active since our last board meeting.
20 Upcoming, we have the MNA conference. We have
21 Brett Thompson-May and Tina Highfill will be
22 presenting at that conference to represent the
23 Board of Nursing.

24 And Dr. Burks will be attending the
25 Community College Board and Department of

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1 Education Regional Collaboration meeting later on
2 this month, I believe. As you know, we do have
3 the PN education program, and Dr. Burks is
4 intimately involved in anything dealing with that.
5 We don't have a lot to do with the curriculum, but
6 we do. So she'll have input also into those
7 curriculum conversations that they have at the
8 Community College Board as well.

9 We have lifted our travel restrictions
10 here at the board, so the staff, as well as board
11 members, if there are conferences coming up,
12 please let us know if you're interested in
13 attending because travel restrictions have been
14 lifted. There are certain guidelines that the
15 travel companies and airlines require that you
16 will have to meet, but let us know if you're
17 interested. We are allowing our staff now to go
18 to conferences that are being held in-person.

19 And I'm being told that probably in March
20 - and I'll send you all a save-the-date - which is
21 our mid-year, NCSBN mid-year meeting. That will
22 probably be in-person, and I think it's in
23 St. Louis. I sent the save-the-date yesterday, I
24 believe. I think it's going to be in St. Louis;
25 it will be in March. I will send it out to the

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1 board members, so if you're interested in
2 attending that, you can go ahead and plan
3 accordingly.

4 And, Mr. Chair, that's all I have at this
5 point.

6 MR. SHAW: Thank you, Dr. Johnson.
7 Any questions?

8 All right. Shan, budget.

9 MS. MONTGOMERY: Good morning.
10 Dr. Mary Stewart is out today, so I will go over
11 the budget. Although the fiscal year ends June
12 30th, the agency had until August 31st to finalize
13 everything for fiscal year '21. A summary of the
14 year included the board collected \$6,836,291 in
15 the revenue field.

16 The expenditures for that year total
17 \$4,346,141.39. Remote working due to COVID
18 decreased our travel expenses and commodities.
19 And as Ms. Johnson just pointed out, that will
20 likely increase in the upcoming budget month.

21 Expenses were lower than the amounts
22 budgeted in every category except contractual
23 services and equipment. The reduction in those
24 areas made the overages possible.

25 Since revenues were higher than expenses,

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1 the board was able to carry a large amount of cash
2 into fiscal year '22. For fiscal year '22, the
3 spending authority began July 1st for \$5,189,911.
4 This includes additional appropriation of \$22,876,
5 which will become available January 21st, 2022.

6 We did receive the salary amounts from the
7 State Personnel Board, which is over this \$22,000
8 amount. We do have the funds, so we will plan on
9 talking with our LBO analyst to increase that so
10 that all of the 3 percent increase that we've
11 discussed over the months will be able to be
12 included.

13 The agency has included this in the
14 internal budget, which is what I just said. This
15 amount will not be added in the accounting system
16 until January 1st, 2022.

17 Travel expenses are still much lower in
18 the budget year due to COVID. The other
19 operational expenses are expected to be the same
20 as last year.

21 The agency will purchase a vehicle this
22 year. I did mention in executive committee; we
23 kind of put that on hold because they had few cars
24 -- the inventory is very low, so we will probably
25 look in January to start looking at vehicles for

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1 the board.

2 Revenue appears to be higher at this point
3 than it was in the last two preceding years.

4 Again, you guys received the individual
5 budget. If you have any questions, comments at
6 this time.

7 MR. CUMMINS: I have a question.
8 Shan, with the -- the -- I mean, I understand the
9 reason, but with there being just a vast
10 difference here in revenue versus expenditures, is
11 that putting us at risk of having a sweep by the
12 state? Is that -- you know, is it one of those
13 things that, you know, if you don't spend it, you
14 lose it type thing? And what can we do?

15 MS. MONTGOMERY: I'm glad you asked
16 that question, Jeremy. I do try to remind the
17 Board of Directors and the staff that if we don't
18 spend it, we do lose and we stand to be swept.
19 We've been swept once before. We're not immune to
20 being swept as an agency. I do encourage, when we
21 send out the notice, if there are any projects,
22 any initiatives that the board needs to be doing,
23 whether it's through Office of Nursing Workforce
24 or through the board or staff, then we need to get
25 those justifications in so that we can utilize

1 those funds in the best way because they will cut
2 the budget.

3 Thank you, Jeremy.

4 MR. SHAW: Any other questions? If
5 not, I have a motion we accept the budget report?

6 MR. CUMMINS: Motion.

7 MR. SHAW: Motion, Jeremy.

8 Second?

9 MS. CLANTON: Second.

10 MR. SHAW: Janie.

11 All in favor?

12 (ALL IN FAVOR.)

13 MR. SHAW: Yes?

14 MS. JOHNSON: Done with that motion?

15 MR. SHAW: Oh, yeah.

16 MS. JOHNSON: I forgot -- I just
17 wanted to mention to you all about the temporary
18 permits. I know you've probably already talked
19 about it. I know we discussed it in executive
20 committee.

21 But I have been doing some research on the
22 temporary permits that we have offered during the
23 COVID era. We were able to offer over 434 --
24 actually, a little over 500 permits to our
25 graduates, endorsements, and retired RNs. And

1 basically, my study dealt with the new graduates;
2 particularly, the ones that went to school in
3 Mississippi. There were 434 permits for
4 Mississippi graduates in Mississippi that we gave
5 out. And we were looking at did their ability to
6 come out and work prior to taking the NCLEX -- did
7 that affect their ability to pass the NCLEX and
8 practice? And the study was significant in that
9 approximately 82 percent passed NCLEX on first
10 write. These were nursing students that came out
11 and worked for 120 days, maybe more, prior to
12 taking the NCLEX -- while waiting to take the
13 NCLEX.

14 It showed that a significant amount passed
15 NCLEX on the first write. Of the 78 that did not
16 pass on first write, they were able to pass it
17 when they went back and took the test.

18 So the study has shown a significance in
19 that I think this is something we can continue.
20 It is already in our law. For whatever reason, at
21 some point, they were -- it was not being done or
22 had stopped being done. And so, I know Mr. Chair
23 will probably bring that out from the executive
24 committee.

25 But I think that's significant. We were

1 able to put approximately 360 new grads working
2 here during a time when we needed them. And so I
3 think that's a good recruitment tool.

4 Some of the hospitals have been behind it;
5 they've contacted me. They want to see it
6 continue for the new grads. I've gotten e-mails
7 and calls because under the emergency declaration,
8 you all extended the temporary permits, COVID
9 permits, through December. Well, this, you won't
10 have to do that. We already have it in law.

11 You know, we would -- you know, are
12 recommending that we be allowed to issue this in
13 accordance with the law to our new grads and some
14 endorsement apps; it's already stipulated in the
15 law who those are. And we have disaster temporary
16 permit for people that may need a temporary permit
17 that are not part of the compact to come in to
18 work under the public health emergency; that's
19 already in our law.

20 So we're asking that you all consider that
21 and make a recommendation through executive
22 committee to continue that.

23 But I wanted you all to have that data.
24 Some of the hospitals even paid for their new
25 grads to take the NCSBN review course prior to

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1 taking the NCLEX, and that's a recruitment tool
2 for those hospitals to retain those individuals.
3 I think it's significant. I just wanted to give
4 you that data.

5 There's more to come. There were 49
6 nursing students that live in Mississippi but went
7 to schools outside of Mississippi. They were not
8 included in the study, but we're assuming that
9 they stayed in Mississippi once they took the
10 NCLEX and passed it. That's more -- we're going
11 to be working with the Office of Nursing Workforce
12 to do some surveys to try to find out if we
13 retained a sufficient number of these people in
14 the State of Mississippi. That's a pocket of data
15 that we're missing, but implications for
16 additional study.

17 So I just wanted you all to be aware of
18 that.

19 MS. COLLINS: So, Phyllis, does that
20 prove that kind of on-the-job training and
21 clinical, maybe there's something with the
22 curriculum in nursing school that they might need
23 to adjust to -- maybe more time for clinicals?

24 MS. JOHNSON: Well, you know,
25 clinical, it's something that is very important.

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1 COVID has impacted that.

2 When I came out, which was umpteen years
3 ago, we were able to do this prior to taking
4 NCLEX, and I think it helped us. I think that you
5 learned the theory, and you don't know all there
6 is to know until you actually get out there and
7 get your critical-thinking skills and the theory
8 and the practice and put it together, and then
9 you're able to think through the exam questions
10 because the NCLEX is only minimum competency. If
11 you can't pass the minimum competency, that's a
12 concern because I think -- but I think this will
13 help. It looks like it has helped.

14 And there has been -- the industry,
15 healthcare industry, is liking it. And so I think
16 that's important; it's significant. And I think,
17 again, that's a reflection on you all as the Board
18 of Nursing, you know, that we implemented this.
19 We've shown that it's worked based on the research
20 that I've done thus far, and there will be
21 additional studies coming out of this; I'm sure.
22 But I just think it's very significant that we
23 were able to do -- show how many passed NCLEX on
24 first write.

25 MS. CLANTON: Are we the only state

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1 that has done this, or is there other states that
2 are doing this?

3 MS. JOHNSON: There are some states
4 that offer temporary nursing licenses; they have
5 different stipulations in accordance with their
6 law. There's been a lot of conversation about --
7 with COVID, because, again, that's another lesson
8 learned, that there are things that have been put
9 in place that probably need to be looked at to
10 continue. And so right now there are some other
11 states that are doing it, but I don't think
12 they're doing it to the extent that we're looking
13 at doing it.

14 MS. CLANTON: So trendsetter.

15 MS. JOHNSON: Right, exactly. That's
16 my word, "trendsetter."

17 MS. COLLINS: Pro-active.

18 MR. CUMMINS: Phyllis, you mentioned
19 the 82 percent pass -- NCLEX pass rate. Do you
20 know a percentage number that that compares to
21 prior to the permit?

22 MS. JOHNSON: Now, Dr. Burks will
23 probably have that information. She's our
24 research-minded person --

25 MR. CUMMINS: Well, just -- just

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1 question --

2 MS. JOHNSON: Do you have any idea
3 what the NCLEX pass rate was? Was it -- prior to
4 implementing the temporary permits? It's done
5 different from school to school, I'm sure.

6 DR. BURKS: Yeah, it varies from
7 school to school, but statewide it was in the 80s
8 for the -- for the year -- for the last year -- for
9 the 2020 year.

10 MR. CUMMINS: Okay.

11 MR. SHAW: All right. So let's just
12 move right into executive committee report, which
13 this encompasses. Dr. Johnson, you had mentioned,
14 as far as with the temporary permits, you were
15 looking at using state law that's already in place
16 to devise a program under it. How long would it
17 take to get that implemented?

18 MS. JOHNSON: We are fully functional.
19 We are looking to have an effective date of
20 December 1.

21 MR. SHAW: Okay. So I was just making
22 sure we didn't need --

23 MS. JOHNSON: And we're asking for the
24 board to give us that permission as of December 1
25 to incorporate that.

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1 MR. SHAW: What we're speaking of is
2 the temporary permits expire December 1 - is what
3 we extended them to - and just wanting to confirm
4 they would have that going before extending.

5 So with that said, coming out of executive
6 committee, would ask that we allow Dr. Johnson to
7 direct the staff to implement a more permanent
8 program around temporary permits.

9 MS. CULPEPPER: I make the motion.

10 MR. ADAMS: Second.

11 MR. SHAW: Motion, Sandra; second,
12 T.J.

13 All in favor?

14 (ALL IN FAVOR.)

15 MR. SHAW: Motion carries.

16 There's one other thing that's come up
17 with questions, and this is just more of a comment
18 dealing with the different organizations that have
19 come out and some of them saying that, you know,
20 if you do misinformation and stuff like that, that
21 there will be questions, and you'll be called in.
22 We already have in our rules and regulations
23 concerning professional conduct. So if there is
24 some type of gross negligence, something like
25 that, that rises to that level, then it can be

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1 addressed through that, but at this time, we have
2 no intention of putting out any type of paper or
3 comment about that directly.

4 With that said, that ends executive
5 committee report.

6 I understand this one is fixing to be a
7 little long - compliance committee.

8 MR. ADAMS: Thank you, Mr. President.

9 So we'll make this brief, but compliance committee
10 was very busy today. We took our whole hour and
11 needed a little more time.

12 But I move that the board adopt the
13 compliance committee's recommendation that the
14 following affidavits, formal reprimands be
15 accepted for ratification, license number
16 R-849303.

17 I move that the board adopt the compliance
18 committee's recommendation to deny the request of
19 license R-914993, request for early release from
20 her 24-month probationary period pursuant to the
21 final order dated and signed February 7th, 2020.

22 I move that the board adopt the compliance
23 committee's recommendation to approve the request
24 of license number R-882251, request for
25 modification of the final order dated and signed

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1 April 23rd, 2021, of the maximum number of hours
2 allowed to work from 88 hours to 96.

3 I move that the board adopt the compliance
4 committee's recommendation to approve the request
5 of license number R-629871, NP, request for an
6 extension of the requirements of the final order
7 dated and signed June 15th, 2021. The committee
8 is granting a 30-day calendar extension on the
9 \$1,000 from the date of approval. The committee
10 is granting a 90-day calendar day extension of the
11 legal aspects of nursing course from the date of
12 this approval.

13 I move that the board adopt the compliance
14 committee's recommendation to approve the request
15 of license number R-861879, request for
16 modification of the final order dated and signed
17 October 18th, 2019. The maximum number of hours
18 allowed to work from 88 hours to 96 hours.

19 I move that the board adopt the compliance
20 committee's recommendation to approve the request
21 of license number R-860437, request for an
22 extension on the requirements of the final order
23 dated and signed July 20th, 2021. The committee
24 is granting a 30-day calendar extension on the
25 \$500 fine from the date of this approval. The

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1 committee is granting a 30-day calendar extension
2 of the ethics course from the date of this
3 approval.

4 MR. SHAW: Is that it?

5 MR. ADAMS: That's it.

6 MR. SHAW: All right. You heard the
7 motion coming out of committee. Any questions?

8 All in favor of accepting the committee's
9 recommendations on the motions before us say,
10 "Aye."

11 (ALL IN FAVOR.)

12 MR. SHAW: Any opposed?

13 (NO RESPONSE.)

14 MR. SHAW: I will want to back up and
15 add something and ask this question. As we're
16 going through here, check the dates of January
17 10th and 11th and January 24th and 25th. That's
18 keeping it on a Monday/Tuesday, as it was before
19 and just see if anybody has any direct conflict at
20 this time with those.

21 MS. CLANTON: Give me those dates
22 again.

23 MR. SHAW: January 10th and 11th and
24 then the 24th and 25th for doing the education
25 session.

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1 MS. COLLINS: What days of the week
2 are those?
3 MR. SHAW: Monday and Tuesday.
4 Anyway, we're moving on.
5 Advanced practice committee? I know she's
6 on the phone, but there seems to continue to be
7 problems because she just texted me again, as far
8 as being able to hear.
9 Dr. King, are you there? If not, there's
10 nothing to come out of advanced practice.
11 Practice committee? I don't think
12 practice committee had anything.
13 All right. Administrative code, that's
14 just getting -- taken over --
15 MR. ADAMS: Nothing -- nothing to
16 bring forward.
17 MR. SHAW: Finance. Shan's taken care
18 of that.
19 ONW? You've already spoke to that one.
20 I have a motion we go into closed session
21 to determine if executive session is necessary.
22 MR. ADAMS: Motion.
23 MR. SHAW: I have a motion, T.J.
24 Second?
25 MR. CUMMINS: Second.

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1 MR. SHAW: Second, Jeremy.
2 All in favor?
3 (ALL IN FAVOR.)
4 MR. SHAW: All right. We will now go
5 into closed session to determine if executive
6 session is necessary. So everybody get out.
7 (Board entered into closed session at
8 12:15 P.M.)
9 (Board returned from executive session
10 at 12:31 P.M.)
11 MR. SHAW: In executive session, we
12 reviewed information related to employees'
13 performance and adjusted the salaries accordingly.
14 At this time, I would like to ask for a motion to
15 -- or declare us in recess until we return for the
16 full-board appeal. Anybody got any questions? We
17 can step over here.
18 MS. MONTGOMERY: We are in recess.
19 MR. SHAW: So in recess.
20 (Whereupon, above-entitled proceedings
21 recessed at 12:32 P.M.)
22 (Back on the record at 2:33 P.M.)
23 MR. WIGGINS: Mr. President.
24 MR. SHAW: Yes. Back on the record.
25 I understand there's a gentleman on the line that

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1 tried to speak at the front of the meeting, but
2 there was some difficulties with being able to
3 hear.
4 Are you still there, sir?
5 UNIDENTIFIED SPEAKER: Yes, I am.
6 MR. SHAW: Go ahead with your
7 question.
8 UNIDENTIFIED SPEAKER: Okay. Yes.
9 Nursing professional organizations have recently
10 come out with a strong statement in support of
11 COVID vaccine mandates.
12 And my question to the board is: If a
13 hospital mandates vaccinations and licensed nurses
14 refuse to participate and refuse vaccination, is
15 that considered unprofessional conduct or would
16 that be eligible for review by the Board of
17 Nursing as a violation of Nurse Practice Acts?
18 MR. SHAW: That would be a legal
19 question that I would not be able to answer at
20 this time. I can get with our counsel and discuss
21 with them on what they would look at as far as
22 that goes. And if you can get us your contact
23 information, I'm sure we can get back with you on
24 that.
25 UNIDENTIFIED SPEAKER: Okay. I think

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1 I have the appropriate e-mails, but I was asked to
2 ask that -- I was actually directed to ask that in
3 the public forum, and so I have. And I guess I'll
4 go back to the private e-mail and try to get that
5 answered that way. Thank you.
6 MR. SHAW: I know as a board, it's
7 been discussed as to whether we should come down
8 as some type of regulation and mandate, and we
9 leave that up to each individual organization and
10 hospital as to their decision on that.
11 Thank you, sir.
12 If that is it, I entertain a motion to
13 adjourn.
14 MS. COLLINS: I so move.
15 MR. ADAMS: Second.
16 MR. SHAW: All in favor?
17 (ALL IN FAVOR.)
18 (Whereupon, the above-entitled
19 proceeding concluded at 2:35 P.M.)
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23
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1 CERTIFICATE OF COURT REPORTERS

2 I, CYNTHIA HARRIS, Court Reporter and
3 Notary Public, in and for the County of Scott,
4 State of Mississippi, do hereby certify:

5 That the foregoing pages contain a full,
6 true, and correct transcription of the proceedings
7 as taken by me at the time and place heretofore
8 stated;

9 That I am not kin or in anyway associated
10 with any of the parties to said cause of action or
11 their counsel, and that I am not financially
12 interested in the action.

13 IN WITNESS WHEREOF, I have hereunto set my
14 hand and seal, this the 25th day of October, 2021.

15

16

17

18

CYNTHIA HARRIS, RPR, CCR 1828

19

20

21 MY COMMISSION EXPIRES: DECEMBER 10TH, 2021

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